Corporate Scrutiny and Performance Panel

Agenda Item No. 8

DATE: 10 April, 2008

Safety and Health Improvement Plan

Ward(s) All

Portfolios: Cllr A Griffiths – Finance and Personnel

Summary of report:

During 2007, the Health and Safety Executive (HSE) conducted three planned inspections of health and safety management, specifically looking at

- general health and safety management across the council
- stress management at the organisational level, and
- the management of asbestos risk in a specific type of education premises (as part of the national inspection programme of CLASP [Consortium of Local Authorities Special Project] buildings).

The commonly identified theme across all three inspections was a risk to the organisation and its people from the inadequate prioritisation and corporate management of health and safety. This was further endorsed by the West Midlands Fire Service, as the fire safety regulator, who identified the same root cause to the failure to manage fire risks in Walsall schools.

These organisations served a number of statutory improvement notices throughout the year to further encourage increased activity and ownership by management at all levels within the council. Both regulators concentrated their focus on management of health and safety in our schools.

Background papers:

Health and Safety Executive Report, 2007. Safety and Health Improvement Plan, Version 5.

Reason for scrutiny:

- One of HSE's concerns was the arrangements for corporate governance of safety issues at a senior level within the organisation. Quarterly reports to scrutiny panel are one method of gaining senior overview of the council's health and safety performance.
- 2) The Council's standard process for responding to external inspections requires formal quarterly monitoring of improvement plan progress.

Resource and legal considerations:

Further improvements to our health and safety management and monitoring will reduce employee absence as well as criminal and civil claims against the Council. During the course of their audits, HSE served seventeen improvement notices (the lowest level of statutory intervention). Work has been carried out to comply with these notices and the recommendations made in the report. There was a requirement for £310,000 to fund additional specialist safety advisory posts and ensure the improvement plan required by the HSE is delivered.

Failure to comply with the recommendations of either the HSE or the Fire Service's inspections and audit may lead to enforcement action up to and including prosecution.

Citizen impact:

No citizen accidents were reported to the council as a direct result of the council working near or with citizens. Citizen injuries on council premises occur but are not part of our occupational health and safety performance unless directly caused by an employee. Other options for enforcement action include prohibition of services until safety deficiencies are rectified. This would result in loss of direct council service to citizens and/or loss of the availability of council premises for community use.

Environmental impact:

None

Performance management:

The corporate governance arrangements for health and safety management within the council require formal overview by scrutiny panel.

Equality Implications:

None

Consultation:

As part of further demonstrating our corporate governance activity, the Chief Executive has convened a Corporate Health and Safety Board to act as the senior consultative committee, regulated by the Safety Representatives and Safety Committee Regulations, 1977; this Board includes all Executive Directors, Assistant Directors where they are chairs of directorate health and safety committees and trade-union appointed safety representatives from all the trades union including the teaching professional bodies.

Contact Officer:

Lorenzo Visentin – Manager of Safety, Health and Wellbeing Services ©. 01922 650454

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1. Background

- 1.1 The HSE carried out an audit of the council's health and safety management system with on-site inspections and interviews of management, staff and union representatives taking place from 29 January to 5 February 2007. This is part of a national campaign, known as the Local Authority Strategic Intervention Programme (LASIP). Local authority health and safety is one of HSE's priority topics. Walsall Council was in the third wave of councils audited in this programme within the West Midlands region.
- 1.2 The audit sampled the management system within the Social Care, Children and Young People and Neighbourhood Services Directorates. The framework for a health and safety management system described in 'HSG65, Successful Health and Safety Management' which details how organisations can comply with their legal duties under the Management of Health and Safety at Work Regulations 1999, was used as the baseline for the audit, although this is fully interchangeable with the council's OHSAS18001 approach.
- 1.3 The risk topics through which the audit team reviewed the Council's management system were:
 - Manual handling and musculoskeletal risks
 - Slip and trip risks
 - Work-related stress including violence & aggression
 - Management of sickness absence
- 1.4 Some matters arising from the initial audit were the subject of statutory improvement notices which the Council rectified within the timescales laid down by HSE. They were:
 - Display screen equipment risk assessments (across the whole council);
 - Training needs of all employees working in schools;
 - Effective management control, monitoring and review of schools' safety;
 - Hand Arm Vibration Syndrome risk assessment within Street Pride; and the
 - Movement and segregation of pedestrians and vehicles at the Public Works Depot.

The written report was received in June 2007 and detailed 50 recommendations for the general improvement of the management of health and safety within the authority (see appendix 1). HSE required a formal response for corrective action that was to be agreed with them before implementation.

- 1.5 A sub-audit looked in some depth at potential work-related stressors in some areas of the Social Care Directorate as this is a leading cause of sickness absence in the wider local authority sector. Stress is another of the HSE's priority topics. The HSE report requires a separate specific stress management improvement plan for social care staff in addition to the more general corporate requirement to improve stress management.
- 1.6 In August 2007 a further sub-audit was carried out related to the management of asbestos in a particular type of school building, known as CLASP buildings, this employed a specific construction method (and was employed by the Consortium of

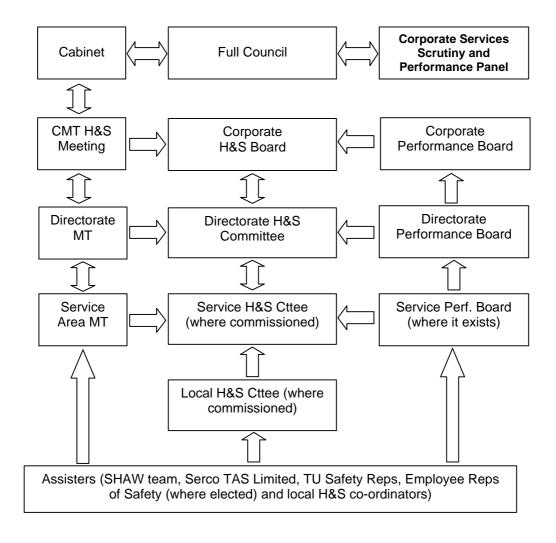
- Local Authorities Special Project CLASP) that has left buildings nationwide at risk of releasing asbestos fibres if not properly managed.
- 1.7 A common deficiency was found in each of the 12 Walsall schools employing this construction method, and HSE served 12 (identical, but) separate statutory improvement notices, one per school. These were rectified before Christmas 2007.
- 1.8 The West Midlands Fire Service has a routine inspection programme for fire safety in schools. A number of Walsall schools have been inspected and required improvements to be made to specified timescales. These have been complied with.

2. Action

- 2.1 There were two distinct approaches required, an immediate response to the breaches for which statutory enforcement notices were served, as well as a medium to long-term strategy to embed health and safety management as part of the council's wider loss control measures and to ensure health and safety management becomes an integral part of the operational management activity across all our directorates.
- 2.2The Interim Chief Executive immediately commissioned an improvement plan in response to the series of inspection reports, expanding it to cover areas of health and safety management not identified in the inspections (such as the management of occupational road risk, an emerging health and safety risk for employers with large numbers of employees driving as a constituent part of their work).
- 2.3 The internal health and safety advisory service (Safety, Health and Wellbeing Service (SHAW)) wrote the Safety and Health Improvement Plan (SHIP) which was approved by the council and agreed with the HSE in late autumn 2007 for immediate action.
- 2.4The HM Inspectors of Safety found that the SHAW team provides an experienced and qualified source of competent advice to the Council and all departments visited during the inspections were aware of the SHAW team and had found them helpful and supportive in giving advice; however they recommended a review of team capacity.
- 2.5 SLT responded positively to this recommendation and immediately identified funds to recruit additional capacity in key safety areas (fire safety 2 posts; driver and vehicle safety 1 post; a dedicated safety training officer; and stress safety 1 work health psychologist post). A further 2 advisory posts were created in specific directorates with areas of high risk (highways safety and educational visits safety), and the Children and Young People directorate funded 2 additional days/week general safety advice specifically to support our schools' safety improvements.
- 2.6A project manager was appointed for a period of 6 months to give the SHIP focus and co-ordination in its early phase. CMT members agreed to lead each of the themes within the plan and project teams have been established, led by an executive director for each distinct improvement theme:

	Safety & Health Improvement PI	an – The	eme Summary		
No.	Short title		Leader		
Α	Corporate Performance		Tim Johnson		
	Management				
IN1	Display Screen Equipment	Pau	I Smith - complete		
IN2	Site transport at the Depot		Mark Holden		
		exten	ded to September 08		
IN3	School Risks and Training	Louis	e Hughes - complete		
IN4	School Safety Management	Louis	e nugnes - complete		
IN5	Hand Arm Vibration Syndrome	Andy Ody - complete			
IN6 to	CLASP	Louis	Louise Hughes - complete		
IN17			-		
1	Policy				
2	Organisation - Competence	vs			
3	Organisation – Control	David Matthews Project Manager	Jamie Morris		
4	Organisation – Co-operation	M Ma			
5	Organisation - Communication	/id jec			
6	Planning & Implementing)a\ Pro	David Brown		
7	Monitoring Performance		Tim Johnson		
8	Auditing and Review		Tim Johnson		
S1	Corporate Stress Plan		Dave Martin		
S2	Social Care Stress Plan		Dave Martin		
F1	Fire Safety Improvement		James Walsh		

- 2.7 The new Chief Executive is taking a robust lead in the management of SHIP. He has included SHIP outcomes in each Executive Director's individual performance management (IPM) targets, and required each Executive Director to attend the Institution of Occupational Safety and Health's (IOSH) "Safety for Senior Executives" training course.
- 2.8 Further, he has convened a new Corporate Health and Safety Board as the lead on the consultation framework on H&S matters, made up of all executive directors, assistant directors where they are chairs of directorate safety committees and trade union appointed safety representatives from each of the trades union and teacher professional bodies.
- 2.9 New corporate governance arrangements have been agreed, with health and safety matters tabled on management team agendas, a refresh of health and safety consultative committees with trade union appointed safety representatives, a revised corporate health and safety policy, quarterly reports on safety performance tabled at Directorate Performance Boards and by exception to the CMT performance board, a continuation of the annual safety report to cabinet, and finally a dedicated CMT meeting (quarterly) to review SHIP progress.
- 2.10 It is also essential that visible scrutiny is made by elected members to encourage continued focus on health and safety by all managers and employees. Corporate Scrutiny and Performance Panel are a key link in the framework, detailed below:



3. Outputs to date

- 3.1 Four of the five original statutory improvement notices were successfully discharged, to the complete satisfaction of the inspectorate, within the limited timeframe set by the Health and Safety Executive.
- 3.2The fifth improvement notice centres on relocation of the North Walsall Depot to a new site, and somewhat unusually this improvement notice has been extended to April 2010 (the proposed go-live date for the new site), with annual reviews, the next review due on September 2008. Clearly the intention is to encourage us to maintain focus and progress on this key relocation project.
- 3.3 Although there were an additional 12 improvement notices served on the CLASP asbestos issue, this was essentially the same notice served on 12 different school sites. All 12 were successfully discharged, again within the timeframe laid down by the HSE, as a result of partnership working with colleagues in SHAW, Property Services, Education Walsall and the schools' safety advisory team from Serco Technical Advisory Services Limited.
- 3.4The West Midlands Fire Service served two cautions on the council as a result of fire safety breaches at one school (one on the head-teacher and one on the body corporate). Both of these cautions have subsequently been revoked following the great progress made in fire safety management across all our premises.

- 3.5 The Fire Service has agreed to suspend its planned inspection programme in our schools to allow us to make more measurable progress, before they recommence their inspection programme in September 2008.
- 3.6 All trades union and teachers' professional bodies have agreed to represent all employees (on a collective basis) on matters of health and safety, whether or not they are members. This has enabled the council to discharge its duty (under the "Safety Representatives and Safety Committees Regulations" and the newer more comprehensive "Health and Safety (Consultation with Employees) Regulations") to consult with the whole workforce at no cost, inconvenience or disruption to services.
- 3.7There has been strong progress in the first three months of SHIP implementation. The current version of the improvement plan is attached at appendix 2. It will be subject to line by line review by the HSE on 17 April 2008, and it is proposed to bring progress updates to this panel each quarter with the focus on exception reporting on matters of emerging risk.

Summary of Health and Safety Executive Recommendations

Following the comprehensive audit carried out by a team of HM Inspectors of Safety during February and August 2007, the following recommendations were made:

Policy

- R1 It should be clear where responsibility lies for implementation of the various Safety Management Standards (SMS). This should be made explicit in each SMS with sections detailing responsibilities of directors, assistant directors, managers, supervisors, employees and any other personnel with specific responsibilities. Alternatively each directorate could record its own organisational arrangements and responsibilities for each of the Safety Management Standards.
- R2 Each Directorate Statement of Local Health and Safety Intent should include the directorate's general health and safety arrangements and structure to show how the directorate will implement its statement of intent.
- R3 Training grids/matrices in the SMS' should be reviewed and a summary training grid stating essential or mandatory training required to cover all of the various standards produced for each directorate.
- R4 The council should ensure it has a system for the effective management of bullying behaviour and clearly state its Anti-bullying policy.

Organisation

Competence

- R5 Essential health and safety training should be identified through the risk assessment and risk management process.
- R6 The content of manual handling and other health and safety training provided should be reviewed to ensure it is suitable for the tasks carried out by the recipients.
- R7 Additional training in accident and near miss investigation and monitoring should be provided to all managers and any other staff who undertake this role.
- R8 The Safety Health and Wellbeing (SHAW) team's resources and training needs should be reviewed to ensure that their advisory, support, policy, monitoring, auditing and other functions can be fulfilled and that the Council has sufficient competent advice in all relevant risk areas.
- R9 The Council should review the legal requirements for health surveillance and the Occupational Health Service's capacity to provide this and implement health surveillance where required for relevant employees.

Control

- R10 Specific health and safety responsibilities and objectives should be recorded for all managers in the performance management system (IPM) and in the Safety Management Standards / any other relevant health and safety policy documents.
- R11 The organisation and consultation structures for health and safety management in each directorate and department should be recorded and reviewed.

Co-operation and Consultation

R12 Directorates should ensure that their departments and service areas have suitable and sufficient systems in place to consult on health and safety matters with union safety representatives and staff who are not represented by unions.

Communication

- *R13* The Council should ensure that it has made adequate arrangements for the communication of health and safety policies and information to staff that do not have access to the intranet as a normal part of their work.
- R14 The Council should review the provision of health and safety information and instruction within its Highways department to ensure that employees are provided with essential health and safety information for the work they carry out.

Planning and Implementing

- *R15* All Directorates should ensure that their health and safety action plans are reviewed and up-to-date.
- R16 The Council should produce a council-wide health and safety action plan with measurable objectives based on its priorities for health and safety management and taking into account the findings of this audit.

Manual handling

- R17 The Council should ensure that its people handling training programme sufficiently covers the selection and use of hoists and slings and that there is a sufficient number of competent persons to deliver the training.
- *R18* The Council should ensure that, in all premises where people are hoisted, there is a robust system for the selection of slings and for the communication of sling size and type to staff.

- R19 The Council should ensure that manual handling activities carried out by caretakers employed by them to work in schools have been assessed and suitable control measures implemented.
- R20 In Social Care premises manual handling risk assessments of non-client handling activities should be carried out.
- R21 The Social Care Directorate should ensure that all slings used for lifting people are thoroughly examined by a competent person in accordance with the Lifting Operations and Lifting Equipment Regulations 1998 and that there is a system in place to ensure that this is carried out every six months.
- R22 The storage and manual handling of items in the cellar area of the Central Library should be reviewed including the risk of manual handling injury and falls.
- R23 The Council should make arrangements to ensure that, in future refurbishment and new build of kitchens, end users are consulted and manual handling risks are considered at the design stage.

Slips and trips

- R24 The council should ensure that in schools where its employees work assessments of the risk of slips, trips and falls have been carried out and action plans including prioritisation of risks are in place.
- *R25* The Council should ensure that there are systems in place for premises inspections including arrangements for the monitoring of slip and trip risks at suitable intervals according to the risk.

Violence and aggression

- *R26* The risk of violence and aggression to caretaking staff in schools should be assessed. The council should ensure that there are adequate lone working procedures for its caretakers in schools and that they have received suitable and sufficient training in handling conflict, violence and aggression.
- R27 Where panic alarms are installed there should be a written protocol for response to alarms and staff should be trained and adequately equipped to deliver the required response. This like other emergency procedures should be tested periodically.
- R28 The Council should undertake an assessment of the risk of violence and aggression in Social Care premises and consider whether panic alarms/staff attack systems are required.
- R29 The Council should review its procedures for reporting incidents of verbal aggression.
- R30 The Council should review the level of training required in handling conflict, diffusion techniques and breakaway training for staff exposed to the risk of verbal and actual violence and aggression

Work-related Stress and Sickness absence

This subject will be further addressed in a stand alone report by the HSE.

- R31 The stress questionnaire should be rolled out to all areas.
- R32 The council should ensure that assessments of the risk of work-related stress are carried out in all areas and that action plans have been produced to address the risks found.
- R33 The Council should, in conjunction with trade unions and PPC, raise awareness of the employee assistance programme and promote the confidentiality of the service.
- R34 The sickness absence policy and procedure should be reviewed to take account of the need for management and Occupational Health interventions arising from some causes and types of ill health irrespective of the length of absence.
- R35 The Council should ensure that it has a system for monitoring and managing work-related stress and other work-related sickness absence in its employees who work in schools.
- R36 The Council should review the system of exit questionnaires for staff moving internal departments and leaving the authority, and how this information can be used to inform stress risk assessments.

Risk Assessment

- R37 The Council should ensure that all areas have carried out suitable and sufficient risk assessments. This can be achieved through ensuring the setting of specific management objectives and the monitoring of those objectives.
- R38 Actions to be taken as a result of risk assessment (additional control measures) should be recorded and monitored.

Highways

- R39 The risk management system in Highways should be reviewed and measures implemented to ensure there is a robust system for managing risks to workers.
- R40 The Council should review the provision of Health and Safety support and competent advice to the Highways and Street pride Highways departments.

Education

- R41 The Council should implement a robust structure and appropriate arrangements in order for it to be able to ensure the effective management of health and safety in schools where its employees work.
- R42 The Council should review the need for a provision, within the local fair funding scheme, to require schools to fund health and safety requirements and a system to monitor and manage this.
- R43 The Council should review and clarify the schools risk register and how this is used by schools, Education Walsall and the Council to plan works and manage risks.
- R44 The Council should ensure that there are adequate arrangements to manage the risk of work at height to its employees in schools.

Measuring Performance

- *R45* Appropriate arrangements should be made and recorded for the proactive monitoring of health and safety in all Directorates.
- R46 The Council should ensure that there is regular reporting of health and safety management progress and standards assurance into the Senior Management Board by a senior manager.
- R47 The results of Occupational Health surveillance should be used as part of its system for monitoring the control of health risks to employees.
- R48 The Council should ensure that accident and incident statistics and information are used at local, service and directorate levels to monitor and review the causes of accidents and incident trends and the effectiveness of its health and safety arrangements.

Auditing Performance

- R49 The Quality Assurance Environment Audit system should be implemented in all care homes and senior management should monitor these audits.
- *R50* Arrangements for auditing the health and safety management system in all Directorates should be reviewed and responsibilities for undertaking audits allocated and recorded.



v.4: 10.12.07

10th December 2007

AUDIT OF HEALTH AND SAFETY MANAGEMENT BY THE HEALTH & SAFETY EXECUTIVE, 2007

Safety and Health Improvement Plan (SHIP)

IMPLEMENTATION MANAGER:

Dave Matthews – 1st October 2007 – 30th April 2008 01922 652019

matthewsdavid@walsall.gov.uk
Paul Smith – 1st May 2008 onwards
01922.653277

SmithPaul@walsall.gov.uk

PERIOD OF PLAN

1 July 2007 to 31 October 2008

CONTEXT

This improvement plan is in respect of the audit of the health and safety management system at Walsall Council by the Health and Safety Executive undertaken in January and February 2007 and the final report published on 10 May 2007 (see **appendix 1**). The overall outcome of the inspection was that while the written system of health and safety management was generally good, the implementation in practice was poor and not consistent across all work areas.

Walsall Council was routinely selected for this inspection as part of a national HSE campaign (the Local Authority Strategic Intervention Programme – LASIP) to prioritise local authority health and safety management and to make government (including local government) exemplars of best health and safety practice.

The inspection team, made up solely of HM Inspectors of Safety, sampled the system within Social Care, Children and Young People and Neighbourhoods Directorates. The risk topics through which the audit was carried out were:

- Manual handling and musculoskeletal risks
- Slip and trip risks
- Work-related stress including violence & aggression
- Management of sickness absence

The audit team looked in some depth at potential work-related stressors in some areas of the Social Care Directorate as this is a leading cause of sickness absence in the local authority sector. A separate report was received in draft form on 30 May 2007 (see **appendix 2**), its findings have been incorporated in this improvement plan.

Additional HSE audits are anticipated during the lifetime of this improvement plan, in the following areas:

- construction (likely to include building design unit, architects, facilities management, and planning and transportation);
- asbestos control in CLASP and other systems-built buildings; and (£200,00 funds in place checks under way to assess columns for asbestos)CLASP12 IN's actions?
- highways maintenance.

This plan addresses all the issues for improvement identified within the audit inspection report as either specific recommendations or comments made indicating where improvement is required or is possible. The mainstream performance improvement agenda for the services covered by this plan are contained within the relevant service plans, team plans, and individual performance targets as part of the IPM scheme, although health and safety performance improvement has failed to be incorporated in this mainstream activity. A number of the specific recommendations in this report address this shortcoming.

There are also cross cutting issues, which are already being dealt with as part of other improvement plans (for example the annual audit letter). This plan does not seek to replicate those actions, and certain issues are therefore signposted to other plans to ensure the relevant connections are made.

The Health and Safety Executive were sufficiently concerned about five specific areas of safety performance that they determined to issue improvement notices for each. Although this is at the lowest level of statutory intervention, this is the first piece of enforcement action since 1999. These are being addressed by individual heads of service and are addressed first in this improvement plan. Responsibility with the SHIP plan –have leaders seen this draft SHIP plan?

This plan focuses on the improvement agenda, so does not cover the many strengths and good practice identified within the report in each of the directorates sampled. They are identified in the body of the HSE report (appendix 1).

The actions for improvement have been devised using SMART principles to ensure clear focus and the best outcomes, as follows:

S	Specific	What exactly are you going to do/change? Absolute clarity is vital.
M	Measurable	How much observable and quantifiable change is planned? What will be different and what will it look like?
Α	Action-oriented	What action are you going to take that will ensure the change? How will you know when you've succeeded?
R	Realistic	Your timescales and targets should be stretching and realistic. Identify the critical path to ensure foundation targets are achieved first.
Т	Time-based	By when are you going to do it/complete it?

The actions in this improvement plan are grouped into logical themes. Each theme has a nominated "theme leader" who is responsible and accountable for ensuring all actions within their theme are implemented to the required standard and within the required timescales. There is one overarching generic theme applicable to all improvement plans entitled "Corporate Performance Management".

This is intended to ensure all performance management and improvement activity takes place within the wider improvement agenda, embeds our corporate approach, enables consistency, and promotes sound corporate governance. The theme leader for this is always the relevant Executive Director, with every senior manager ensuring compliance in their service.

Each recommendation/issue raised in the report is shown in this plan; relevant actions are directly linked to it. Improvement actions are

prioritised as either \bigcirc , \bigcirc or \bigcirc , with \bigcirc being the highest priority. **BLUE** priority \bigcirc s are of particular/critical importance and/or are foundation actions that need to be done first as other actions are dependent upon them. Each action has a named individual, responsible for implementation. The relevant Cabinet portfolio holder is also shown.

Many issues are crosscutting and/or covered in other plans. Where appropriate, these connections to other plans and/or sections of this plan are signposted. Each theme leader should liaise with the Implementation Manager of the other plans to ensure actions are neither duplicated nor missed. The key for other plans is as follows:

AAL – annual audit letter (formerly known as annual management letter) issued by the Audit Commission.

ACAR – Audit Commission audit report action plan

BMCM – budget management and control manual

CS – communication strategy

EAP - equality action plan

EP – environment improvement plan

HP – housing improvement plan

IAAR – internal audit report action plan

MTFP - medium term financial plan

NRF – neighbourhood renewal fund plan

RMP - risk management policy

RR – risk register

SHIP – Safety and health improvement plan

SP – service plan (state which one)

SSP – social services improvement plan

SLT – Strategic Leadership Team

SMS – Safety Management Standards

DMT – Departmental Management Team

SPB – Strategic Performance Board

The final column shows the current status of each action against target. This enables the original version of the plan to be updated for monitoring and reporting purposes. The traffic light and arrows system in common use throughout the performance management framework, also applies here:

management mamerient, also applies herei						
G	means on target					
A	means slightly off target and/or not on target but entirely recoverable					
● R	means off target and at risk					

Û	Performance improving since previous report
\Leftrightarrow	Performance stable since last report
Û	Performance declining since last status report

OVERALL PLAN

Dave Matthews/ **Paul Smith**

Councillor A. Griffiths

Corporate

Quarterly

Monthly

The final column should indicate when the action is entirely **COMPLETE**.

Key responsibilities/frequencies are as follows: The themes within this improvement plan are as follows:

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	THEM	E			OVERA	
No	SHORT TITLE		LEADER	TEL	Implementation Manager	
Α	Corporate Perf. Mngt.	Ti	m Johnson	2431	Cabinet Portfolio Holder	
IN1	Display Screen Equipment	F	Paul Smith	5601	Scrutiny Panel	
IN2	Site transport at the Depot	M	lark Holden		Reporting to Cabinet	
IN3	School Risks and Training	Louise Hughes		2032	Reporting to SLT	
IN4	School safety management			2032		
IN5	Hand Arm Vibration	Andy Ody				
IN6/17	CLASP	Jim Ball				
1	Policy		David Kempson			
2	Organisation - Competence		Gerry Butler			
3	Organisation – Control	s to	Rob Flinter*			
4	Organisation – Co-operation	hew nage	Caroline Lawrence			
5	Organisation - Communication	att Mai	Darren Caveney	2524		
6	Planning & Implementing	David Matthews Project Manager	Rob Flinter 6a, 6b/ 6c-6dd Jamie Morris/Tim Johnson/David Brown	3521		
7	Monitoring Performance		David Kempson			
8	Auditing and Review		Tim Johnson			

S1	Corporate Stress Plan	Lorenzo Visentin	0454
S2	Social Care Stress Plan	Lorenzo Visentin	0454
F1	Fire Safety Improvement	Keith Stone	

A. CORPORATE PERFORMANCE MANAGEMENT

Incorporating health and safety management within the wider performance improvement agenda

THEME LEADER: Tim Johnson

REF	CORPORATE	IMPROVEMENT ACTION	PRIORITY	BY WHOM?	SIGNPOST	CURRENT
	ISSUE		1 2 3		PLANS	STATUS
A	Incorporate H&S planning and target(s) in service planning	 100% coverage Compliance with corporate health and safety plan template Signed off by Reviewed quarterly by DMT Develop directorate and service local arrangements 	1	All EDs, ADs and GMS	Present h & s template, does this need reviewing? Need to define Strategic and Operation Directors (DM/DK)	New structure for H & S agreed by SLT 15-11-07
В	Incorporate H&S planning and target(s) in Team Plans	 100% coverage Connected to service plans Reviewed quarterly Develop team local arrangements where needed in addition to directorate or service level management local arrangements 	1	All ADs and GMs	Link to SPs	New structure for corporate and directorate h & s committees Should have as agenda items at each meeting
С	Team Meetings include H&S issues	100% coverageTaking place at least monthlyMinutes/action notes taken	1	All EDs, ADs, and GMs		SHIP information already

		■ News and views 100% coverage Cover non-TU represented employees				circulated by Internet to all staff. Discussion s held with Darren Caveney. DM attending ERF 17- 12-07
D	Risk Management includes significant H&S risks	 Directorate risk register in place, includes significant H&S risks and is reviewed quarterly at DMT Full participation in relevant risk actions arising from strategic risk register Risk assessments in place for every post, activity and physical location Risk assessment in place and being used for every project 	1	All EDs All ADs/GMs All ADs/GMs All ED, AD, GM	RR/RMP	DM received fro m DK draft Corporate Strategic Risk Assessment doc, with Management Action Plan . Further discussion needed
E	Investors in people incorporates health and safety principles.	 Current recognition for whole directorate 	1	All EDs		Check progress/ Who is the responsibl e officer
F	Equality standard Does this cover 'specific' H&S issues?	 Level 2 achieved Level 3 actions being implemented for achievement by 31.12.07 	1	All EDs	EAP	Attended black employees meeting, e mailed the other 3 special interest committees

G	Sickness Policy	The council has introduced a new sickness policy, and are proactively managing sickness absence, The intention is for a significant reduction in sickness over the next 12 months	1	All EDs, ADs and GMs		Have met senior occupational health nurse. Sickness figure requested – 25 th October 2007.
Н	Resources prioritise H&S	 Budget reported alternate months to mgt teams at various levels. Corrective action taken promptly Savings implemented (which)? Investment implemented? Delivering targets within budget 	1	All EDS All EDS All EDS All ADS/GMS	MTFP BMCM	Action required DM to discuss with LV and others
I	Scrutiny	 Relevant scrutiny panel fully engaged in general safety performance improvement Adoption of CIPFA Good Governance Standard for Public Sector as adapted for H&S, recognises scrutiny panel contribution to governing body Strategic H&S Forum developed as technical monitoring panel 		Exec Direc ADs	The principle is agreed with the practicalities to be discussed	Progress required Who is the lead officer Constitutio n What format of new forum?
J	Resourcing technical advice to the authority: Increase provision of outdoor education safety advice Increase provision	 Audit service provision and health check Recruit H&S technical leader Recruit (or engage) a specialist Outdoor Education Safety Adviser (OESA). TAS are providing advice to schools in this area for their team. 	1	Internal/SHAW or external? Who is responsible? done		Done 2 full time, 2 for

of fire safety advice Increase provision of asset safety (asbestos, legionella) advice Increase provision of auditing function Increase provision for statutory health surveillance (occ health) Increase capacity for driver and	 Recruit two fire safety advisers (see separate SLT report) Recruit (or engage) safety compliance auditor(s) Recruit (or engage) sufficient OH capacity to conduct statutory health surveillance (or create capacity by revising sickness absence policy (see 6t below)) Recruit or engage driver and vehicle safety specialist (see separate SLT report) Nominate trained safety co- 	Who is leading? Tracey's replacement & additional? Who is responsible?	remainder of this financial year Employees to be covered by medical surveillance Timeframe
vehicle safety management Develop provision for high risk activities Develop provision of competent stress preventative advice.	 Nominate trained safety coordinator at N Walsall Depot Recruit highways-specific safety officer. Recruit dedicated H&S trainer. (Post created by OD restructure) Recruit work health psychologist(s). 		Check progress Check timeframes HSE stress report/Progress on appointment

IN1. Display Screen Equipment (HSE deadline 04/01/07)
Establish numbers of DSE and users, risk assess their use and control residual risks.

THEME LEADER: Paul Milmore

REF	REPORT			BY W	VHOM?		SIGNPOST	CURRENT
IN1	RECOMMENDATIO N OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER CIIr A Griffiths	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
IN1a	Identify any display screen equipment (DSE) workstations which may be used for the purposes of your undertaking and any DSE users (employees who habitually use display screen equipment as a significant part of their normal work)	Communication – LV & Steve Phipps to communicate to all business support colleagues the need to nominate a local DSE assessor, identify workstations & users by Monday 15 th October 2007. Louise Hughes to ensure a similar exercise is completed within Walsall schools by 15 th October 2007. EDs to communicate to their teams the requirement to ensure business support colleagues have identified a nominee for local assessor, release the nominee for training w/c 29 th October 2007, and ensure SHAW is provided with the names		Paul Milmore/ ISS working group PM/ ISS working group/ Matt Cresswell		15-10-07		Report to CE of 7-12-07 presently on track to satisfactorily discharge IN by January 4th 2008

		& inventories. Training – Local DSE assessor nominees will indicate their preferred training day by 19 th October 2007. Managers will release nominated local DSE assessors and SHAW will train all identified assessors by 2 nd November 2007. Resources – SHAW will make available paper copiers of "self assessments" & "self directed learning brochures" to local DSE assessors at their respective training sessions by 2 nd November 2007.			2-11-07	COMPL	LETE
IN1b	Carry out a risk assessment of the DSE workstations identified to ensure that they meet the requirements laid down in the schedule to the regulations and an analysis of health and safety risks to which persons are	Self Assessments – Managers will require all employees using DSE to complete and return their self assessments to their local DSE assessor (assessors conducting assessments on workstations that don't have identified users) by	①	PM/ Ruth Pickering PM/ ISS working Group	16-11-07	COMPL	

exposed in consequence of them being DSE users	16 th November 2007. Assessments – Where self assessments require 1:1 follow-up by the local DSE assessor (and this is by exception) these will be completed by 30 th November 2007.	PM/ ISS working group/ Matt Cresswell	30-11-07	G COMPLETE
	Gap Analysis – All local DSE assessors will compile and deliver a summary report of activity (self assessments, 1:1 assessments, recommendations and line manager actions) to SHAW by 7 th Decd 2007	PM/ ISS working group/ Matt Cresswell	7-12-07 On track	COMPLETE
	Remedial Action – If required, SLT will mandate further urgent corrective action to address any gaps identified no later than 21st Dec 2007	CEx, SLT, AD's, DMT, General & Service managers, Head Teachers, first & second line managers	21-12-07	are actioning this through assessors

Implement measures to reduce the risks identified in consequence of your assessment and analysis	Completed assessments are held by the manager and assessor for that	①	All managers &		
	employee. Manager will take appropriate action to eliminate/ reduce the risks identified. Assessors will record this action on the database no later than 7th Dec 2007		nominated DSE Assessors		G û
Make a record of your significant findings and communicate those findings and control measures to the relevant employees	All managers and DSE Assessors are required to communicate their findings to employees before 'signing off' the assessment as complete	①	All managers & nominated DSE Assessors	Complet ion by 4 th January 2008	• G
	Database to keep a record of completed assessments for a period of 3 years. All employees will be		PM/ISS		•G
	prompted annually to redo their self-assessment through the portal; unless a significant change occurs within this time scale.		ISS/ AII Manager	Ongoing	•G
	significant findings and communicate those findings and control measures to the	Assessors will record this action on the database no later than 7th Dec 2007 Make a record of your significant findings and communicate those findings and control measures to the relevant employees All managers and DSE Assessors are required to communicate their findings to employees before 'signing off' the assessment as complete Database to keep a record of completed assessments for a period of 3 years. All employees will be prompted annually to redo their self-assessment through the portal; unless a significant change occurs within this time	Assessors will record this action on the database no later than 7th Dec 2007 Make a record of your significant findings and communicate those findings and control measures to the relevant employees Database to keep a record of completed assessments for a period of 3 years. All employees will be prompted annually to redo their self-assessment through the portal; unless a significant change occurs within this time scale.	Assessors will record this action on the database no later than 7th Dec 2007 Make a record of your significant findings and communicate those findings and control measures to the relevant employees Database to keep a record of completed assessment for a period of 3 years. All employees will be prompted annually to redo their self-assessment through the portal; unless a significant change occurs within this time scale.	Assessors will record this action on the database no later than 7th Dec 2007 Make a record of your significant findings and communicate those findings and control measures to the relevant employees All managers and DSE Assessors are required to communicate their findings to employees before 'signing off' the assessment as complete Database to keep a record of completed assessments for a period of 3 years. All employees will be prompted annually to redo their self-assessment through the portal; unless a significant change occurs within this time scale.

sent to employees through the HRD portal			•G
on a quarterly basis to remind them of the	LV/SHAW		
requirement to complete	27,612.11		
the self assessment form following a			
significant change.			

IN2. Vehicle/pedestrian segregation at Norfolk Place Depot (HSE deadline 2/11/07)
Risk assess the risk to people at the Depot from vehicles and reduce those risks

THEME LEADER:
Mark Holden

REF	REPORT			BY W	/HOM?		SIGNPOST	CURRENT
IN2	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
IN2a	Carry out and record an assessment of the risks to employees and non-employees arising from the movement of pedestrians and vehicles on your site addressing the following Site design and layout including work areas, traffic routes, pedestrian routes, vehicle parking areas and manoeuvring areas Segregation of pedestrians and vehicles Restriction of reversing of vehicles Visibility and marking of routes, suitable speed limits and safety signs Visibility of pedestrians and lighting Road surface and condition Controlling site access and systems of work for the collection and	Engage external risk assessor and design consultants to carry out and record risk assessment, and propose suitable and sufficient depot re-design to reduce risks to an acceptable level.		Mark Holden		31.05.07		COMPLETE

	delivery of vehicles and operatives from and to site Instruction, information and training, supervision and competence of employees					
IN2b	Implement appropriate arrangements to control the risks identified and make a record of your actions to address risks	Develop detailed cost benefit analysis of proposed solution	1	Mark Holden		COMPLETE
IN2c	Take any equally effective means to comply with the requirements of this notice	Consider closure of the depot and redistribution of services to other facilities within the Borough.	1	Keith Stone		•G
		Cabinet has now approved the recommendations for a new "North Walsall Depot" on 24 th October 2007. Improvement notice extended until completion.	Amanda James visit 24/10			council decision find new depot HSE to extend IN

IN3. Risk assessment and training as a control measure in all schools (by 28/6/07) Risk assess jobs in schools, analyse and deliver training to reduce those risks Work complete.

THEME LEADER: Louise Hughes

REF	REPORT			BY W	/HOM?		SIGNPOST	CURRENT
IN3	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
IN3a	Carry out a suitable and sufficient assessment of the risks associated with the job roles in schools in which your employees are working, including both teaching and non-teaching staff.	Identify job roles Risk assess those roles Record findings Identify residual risks that require further control	1	Lorenzo Visentin		18.04.07		COMPLETE
IN3b	Undertake a training needs analysis based on your assessment findings	Carry out TNA Identify suitable training, validated externally where possible	1	Lorenzo Visentin		18.04.07		COMPLETE
IN3c	Make arrangements to ensure that the identified training is delivered to existing employees and ensure that arrangements are in place for delivering the training to new staff on induction	Create schools safety officer training post, awaiting appointment Mandate training Revise fair funding scheme to permit funding clawback from schools	1	Louise Hughes in liaison with David Kempson Schools health and safety training officer to co- ordinate in		1.09.07 Fair funding 'clawback' could not be actioned until April 2008,if the proposal is accepted.		• G

IN3d	Make arrangements for	Commission CPD team at Education Walsall to promote training. Complete training schedule that is sent to all schools for inclusion in their training plans as part of wider communications strategy for H and S awareness in schools. This would be based on developing model of information sharing, involvement, consultation, and provision.(This has been successful in the area of Fire Safety Training)	(1)	Schools	(There would need to be a period of consultation to get approval) CPD team to be consulted with expected responsibility aspects by September 2007.	
	refresher training where appropriate	refresher training plan	U	Training Officer	2007	
IN3e	Make arrangements for monitoring the assessments and	Commission CPD team at Education Walsall to capture	1	Schools Training Officer	1/08/07	•G

training and adapting them as needed to take account of any new or changed risks to the health and safety of the employees concerned and risks arising out of their work which may affect others	all learning under this programme. Require SHAW officers to monitor risk assessment in conjunction with H&S committee.	Louise Hughes in liaison with David Kempson and David Harulow		1/08/07		
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The HSE see this as a 'key' risk area and therefore they expect to see in place those actions that were indicated by the council on any future visit, in addition audit and review systems

IN4. Overall management control of health and safety in all schools (by 28/06/07) Identify manager(s), clarify their responsibilities, and take proactive measures for safety. Work complete.

THEME LEADER: Louise Hughes

REF	REPORT			BY W	/HOM?		SIGNPOST	CURRENT
IN4	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
IN4a	Identify those people who have, or should have, responsibilities for managing and monitoring health and safety in schools		1	Louise Hughes	CIIr Ali			COMPLETE
IN4b	Clarify the health and safety responsibilities of those people identified and make arrangements to ensure the activities of everyone identified are well co-ordinated		1	Louise Hughes	CIIr Ali			COMPLETE
IN4c	Set standards to judge the health and safety performance of the people identified above		1	Louise Hughes	CIIr Ali			COMPLETE
IN4d	Make and record arrangements for adequate routine inspections, checks and audits to ensure that preventative and protective health and safety measures are in		1)	Louise Hughes	CIIr Ali			COMPLETE

		T	ı	1	ı	1	ı
	place and effective in schools. Your arrangements should detail what monitoring will take place, how often, who is responsible for monitoring, resources and competences requires and made available, what will happen with the results of the monitoring and how the results of the monitoring will be used to manage health and safety.						
IN4e	Make and record arrangements for the periodic review of the whole of the H&S management system in the education department including the elements of planning, organisation, control and monitoring to ensure that the system remains effective.		1				COMPLETE

IN5. Hand arm vibration risk assessment in Street Pride (HSE deadline 21 May 07)
Work complete.

THEME LEADER:
Andy Ody

REF	REPORT			BY W	/HOM?		SIGNPOST	CURRENT
INIS	RECOMMENDATION	IMPROVEMENT	PRIORITY	MANAGER	PORTFOLIO	BY	TO OTHER	STATUS V
III	OR ISSUE	ACTION	1 2 3		HOLDER	WHEN?	PLANS	TARGET
IN5a	Ensure a suitable and sufficient risk assessment is carried out by a competent person that will: a) identify all the tools, equipment, and work activities that cause hand arm vibration related injury b) take account of the general suitability and selection of the tools/work equipment for the intended work c) include data on likely vibration emission during the conditions of intended use of the tools and equipment d) identify those employees who may be at risk and their times/patterns of exposure to HAV e) assess the risk to	Identify suitable competent risk assessor (externally) to carry out risk assessment	1 2 3	Andy Ody	HOLDER First name Last name	WHEN? 18.05.07	PLANS	TARGET
	tools and equipment d) identify those employees who may be at risk and their times/patterns of exposure to HAV							

fir	to HAV. Lecord the significant and	Record the significant findings of the risk assessment.	①	Andy Ody	18.05.07		OG COMPLETE
f) g)	A(8) identify any necessary protective and preventive measures including appropriate health surveillance if necessary) identify the nature of and arrangement for the effective provision of suitable and sufficient information, instruction and training for those employees exposed					Discussions DM/Occ Health Nurse, require data base to store information	

NI 6 – 17 CLASP Buildings – Undertake analysis of schools building columns to assess potential asbestos hazard, carry out remedial work - HSE deadline 12th December 2007.

IMPROVEMENT

ACTION

REF

REPORT

RECOMMENDATION

THEME LEADER: J. Ball

SIGNPOST **CURRENT** BY TO OTHER STATUS V WHEN2 PI ANS TARGET

1140	OK ISSUE	ACTION	1 2 3		HOLDER	WHEN?	PLANS	IARGEI
17								
-17								
IN6-17 a	CLASP - Make a suitable assessment as to the likely presence and condition of asbestos containing materials associated with the buildings		1	J.Ball		Complete all actions by 12.12.07		●G ⇔
b	columns or prepare and implement a written plan for managing the risk by maintaining or removing the asbestos containing material. Check the conditions of the building (s),							

PRIORITY

1 2 2

BY WHOM?

PORTFOLIO

MANAGER

	and a state of	Т		I		1
	especially the presence					
	of gaps in, above and					●G
	behind the column					
	casings and any damage					\Leftrightarrow
	or fixings to the column					
	casings					
С	Assess whether the					
	condition of the column					
	casings and any					
	associated structures					
	may give rise to the risk					
	of building users being					• G
_	exposed to ACM's					\Leftrightarrow
d	Duanana and mutinta					_\
	Prepare and put into					
	effect a plan to manage					
	the risk. To include:					
						•G
	Work to seal any holes in					
	the column casings, gaps					\Leftrightarrow
	in joints between column					
	casing sections, between					
	the column casings and					
	skirting and between					
	column casings and walls					
	or other fixed parts of the					
	building structure where					
	a gap may lead to					
	potential exposure to					Visits by HSE 6 th & 10 th
	ACM's as indicated in the					
	risk assessment					December 07
						to assess remedial work.
	Make and record					remedial work.
	appropriate					
	arrangements for				Phone calls/e	
	protecting the column				mails between	
					HSE/DM/David	
	casings from future					

damage, monitoring the condition of the columns and ensuring that the column casings are properly maintained, and			Roles Discussed between Tim Johnson/Sarah Homer & DM 10/12/07 1200	
Make/update written records of the location and condition of ACM's in the buildings				

1. POLICY	THEME LEADER:
Set out our commitments for management of health and safety	Paul Smith

REF	REPORT			BY W	HOM?		SIGNPOST	CURRENT
1	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
•		ACTION	1 2 3		HOLDER	WHEN!	PLANS	TARGET
1a	It should be clear where responsibility lies for implementation of the various Safety Management Standards (SMS). This should be made explicit in each SMS with sections detailing responsibilities of directors, assistant directors, managers, supervisors, employees and any other personnel	Corporate Health and Safety Policy already stipulates the alternative option (given left below). Responsibilities for policy-makers, planners and implementers to record our organisational arrangements and					A solution could be to amend wording to All Strategic and Operational Managers Understood Paul Smith could be	DM believes option 1 is more likely to be successful. Needs SLT decision DM presentation to CE and HSE best
	with specific	responsibilities for					doing some	option 1 st not

responsibilities. Alternatively each directorate could record its own organisational arrangements and responsibilities for each of the Safety Management Standards.	each SMS (i.e. produce local arrangements at directorate, service or team level as appropriate based on need).				work on this. The new Directorate h & s committees to address	requiring directorates to develop their own.
	Council-wide changes to job descriptions to include extracts from H&S policy: Policymakers – Cex / EDs & Ads Planners – Heads of Service and their direct reports Implementers – Line managers Implementers – employees Via: Extraordinary IPM session to discuss and embed JDs.	1	Led by Rob Flinter All managers: CEx, SLT, ADs, Head Teachers, Heads of Service	All portfolio holders	Check with Rob Flinter/Paul Smith	No progress needs action! Recommend general statement to be included, refined as responsibilitie s increase for officers
	Local arrangements to be developed for directorates.	1	EDs	All portfolio holders		DM discussions with DK

		SHAW to assist with the development and maintenance of the local arrangements	1	SHAW	SHAW Officers to be asked via LV to identify gaps in Directorates they look after SHIP 3a SHIP 1b SHIP 6a	
1b	HSE Report ref: R2 Each Directorate Statement of Local Health and Safety Intent should include the directorate's general health and safety arrangements and structure to show how the directorate will implement its statement of intent.	Review each local statement of intent to ensure they are up-to-date with regard to the directorate structures and identify specific responsibilities & accountabilities. Plan review dates	1	EDs, SHAW EDs and	New H&S structure addresses this point. Points re each Directorate h & s template/arran gements discussed with DK. Will propose inaugural meeting of Corporate and Directorate H	•G

		for each local statement of intent to ensure a yearly review by the relevant performance board.	1	chairs of performan ce boards	& S committees have this on their agendas.	Membership of performance board?
1c	HSE Report ref: R3 Training grids/matrices in the SMS' should be reviewed and a summary training grid stating essential or mandatory training required to cover all of the various standards produced for each directorate.	Review the training grid for each SMS to ensure consistency throughout and appropriate coverage of training.	1	SHAW	DK to review in line with work under 1a	●A ⇔
		Develop a corporate mandatory H&S training grid, incl: • Fire briefing • IOSH Directing Safely • IOSH Managing Safely • CIEH Induction • CIEH Foundation in Stress	1	SLT (to mandate) SHAW & OD (to develop)	Discussed with David Kempson and Sarah Homer/All Managers presently expected to undertake h & s training	●G ⇔

	Awareness					
	Include a mandatory health and safety training requirement (IOSH Directing Safely*) for policy-makers in each SMS grid.	1	SHAW		Discussion David Kempson.	•A
	Review local arrangements and health and safety action plan for each directorate to ensure that training needs are identified and a directorate safety training plan developed.		EDs		New H&S structure Check with Gerry Butler who is moving towards a data base	●G ◆

2. ORGANISATION OF H&S MANAGEMENT - COMPETENCE THEME LEADER:

Gerry Butler

REF	REPORT			BY WI	HOM?		SIGNPOST	CURRENT
2	RECOMMENDATION	IMPROVEMENT	PRIORITY	MANAGER	PORTFOLIO	BY	TO OTHER	STATUS V
2	OR ISSUE	ACTION	123		HOLDER	WHEN?	PLANS	TARGET
2a	HSE Report ref: R5 Essential health and safety training should be identified through the risk assessment and risk management process.	Risk Assessment training to be mandatory for one manager in each service area (as a minimum). Allocate sufficient additional resources to be able to achieve this training requirement Through risk assessment and SMS identify training needs Develop and populate council	123	SLT (to mandate); EDs (to identify and fund training for 1 manager per service) Heads of Service and Head Teachers ISS, SHAW, Heads of service SHAW,	HOLDER	Add dates By who & when All dates need inputting by Them Leaders Who	who will provide training? All employees roles identified and inserted into job descriptions. How much & from where	All Heads of Service/Head Teachers to develop
		wide Risk assessment register (database)		Heads of service			DM considering document as per Social Services	

		Monitor database to ensure RA are completed for all jobs, activities and premises Produce directorate specific training plan matrix based on need, drawn from RA outcomes		Heads of Service and Head Teachers		
2b	HSE Report ref: R6 The content of manual handling and other health and safety training provided should be reviewed to ensure it is suitable for the tasks carried out by the recipients.	Identify what manual (including people) handling and other health and safety training takes place in addition to that offered in the corporate Leadership and Development Training Programme Review training content of all	2	Heads of Service, Head Teachers, SHAW Heads of Service, Head		Progress reports required. New Theme Leader Identified and informed 4 th December 07.

		non-central courses against benchmark of CIEH syllabus offered corporately		Teachers, SHAW	Insert dates		Identify such courses.
		Identify through risk assessment requirements for training.	2	Heads of Service, Head Teachers Gerry Butler and SHAW.			● A <⇒
		Source suitable and sufficient training solutions to address need.			Dates for progress?		●A Internal/External?
2c	HSE Report ref: R7 Additional training in accident and near miss investigation and monitoring should be provided to	Through training matrix identify numbers to undertake training	①	SLT, AD's, Head Teachers, heads of service		SHIP 2a	A \$\Rightarrow\$
	all managers and any other staff who undertake this role.	Identify number of courses	2	SHAW		Methodology for	

		required to meet need Identify any additional resources necessary to run sufficient courses Run courses	2	Paul Smith SHAW	identifying trainers, Seek update from SHAW. Identify amount and who will provide funds Internal/external Via what route? nternal/external trainers	
2d	HSE Report ref: R8 The Safety Health and Wellbeing (SHAW) team's resources and training needs should be reviewed to ensure that their advisory, support, policy, monitoring, auditing and other functions can be fulfilled and that the Council has sufficient competent advice in all relevant risk areas.	See Section J Provide SHAW with additional business support to support these advisors Consider mixed economy of service provision with engagement of external providers for	2	Paul Smith Steve Phipps Paul Smith	SHIP: J SLT agreed additional resources for new personnel. Further review necessary. DM still to conduct review of SHAW Discuss with LV/DK prepare positional paper.	G ♦

		some services.				
2e	HSE Report ref: R9 The Council should review the legal requirements for	Ensure Risk assessments identify health	0	All managers	SHIP 7c.	●A ⇔
	health surveillance and the Occupational Health Service's capacity to provide this and implement	surveillance as necessary. see 7c.	(2)	Replacement	Progress and employees who are affected re vibration & noise.	DM meeting with OH Nurse, HAV completed, persons being considered by Doctor
	health surveillance where required for relevant employees.	develop occupational health procedures as necessary		occ health nurse and SHAW	OCC Health Team Costs?	●G ⇔ Discussions
		Make provision for any necessary additional		Paul Smith	DV/OCC Health	covered need for data base to store information
		resource Ensure SMS (for example-Noise) include the Health surveillance requirements	2	SHAW		DM to discuss

3. ORGANISATION OF H&S MANAGEMENT – CONTROL

Each manager to be accountable for one H&S target & develop strong consultation.

THEME LEADER:
Rob Flinter

REF	REPORT			BY W	HOM?		SIGNPOST	CURRENT
3	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
3a	HSE Report ref: R10 Specific health and safety responsibilities and objectives should be recorded for all managers in the performance management system (IPM) and in the Safety Management Standards / any other relevant health and safety policy documents.	Changes to JDs. Review IPM guidance, forms and training to ensure that health and safety responsibilities and at least one H&S objective is included in an individual managers' performance management targets.	1	Rob Flinter		Progress report required, set targets, dates, etc Include changes to job descriptions	SHIP 1a	
3b	HSE Report ref: R11 The organisation and consultation structures for health and safety management in each directorate and department should be recorded and reviewed.	Review and develop existing structures for health and safety consultation in each directorate based on need.	1	ED's Policy Makers, SHAW			SHIP 4a Partially covered by H&S structure.	●G ①

		1		T	1
	Secure Trades Union acceptance of reviews and any necessary developments.		Paul Smith		• G
					1 1
					TU H&S Committee meeting 9 th October 2007 & 4 th Dec, meetings with TU Regional Officers.
	Use News and Views as consultation tool on matters		SLT		●G ⇔
	affecting all staff.				To cover non represented employees. DM attending ERF 17-12-07 to discuss
					All employees' December payslips.

4. ORGANISATION OF H&S MANAGEMENT – CO-OPERATION & CONSULTATION
Making provision for managers to engage with employees on Health & Safety issues
Paul Smith

REF	REPORT			BY W	HOM?		SIGNPOST	CURRENT
4	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
4a	HSE Report ref: R12 Directorates should ensure that their departments and service areas have suitable and sufficient systems in place to consult on health and safety matters with union safety representatives and staff who are not represented by unions.	Through consultation with Trades Union colleagues, review safety committee constitutions including membership. Amend as necessary to ensure that staff representation for non-union members is also included in the group membership.		Paul Smith			New corporate H&S structure. Discussion DM to JNCC and ERF to determine best method of addressing this. DM attending ERF 17-12-07 to discuss E-mails with Caroline Lawrence.	G ← G ⊕ €

5. ORGANISATION OF H&S MANAGEMENT – COMMUNICATION

Provide information about hazards, risks and controls to those affected

THEME LEADER:
Darren Cavery

REF	REPORT			BY W	HOM?		SIGNPOST	CURRENT
5	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
5a	HSE Report ref: R13 The Council should ensure that it has made adequate arrangements for the communication of health and safety policies and information to staff that do not have access to the intranet as a normal part of their work.	Identify managers who do not have access to the intranet Arrange for all areas to have access to the intranet made available (in line with HRD portal 'kiosk' roll-out), including schools.	Check ISS	Heads of Service, ISS AD Lisa Hemus, ISS AD Paul Milmore			Discussion with head of communicatio ns have taken place to identify managers that do not have access. DM to discuss with ISS Possibly schools crossing patrols	⊕ ⊕ ⊕ ⊕
		Arrange for them to have access at other predetermined locations and times		Heads of Service			Check present arrangement "1 stop shop".	Discussions re one stop shop.

		Managers to brief employees on health and safety issues that affect them, including significant findings from risk assessments and compliance with work instructions through team brief / tool box and record those briefings.	Heads of Service		Ensure across all Directorates H & S committees discuss
5b	HSE Report ref: R14 The Council should review the provision of health and safety information and instruction within its Highways department to ensure that employees are provided with essential health and safety information for the work they carry out.	Review risk assessment processes with planning (client) colleagues. Develop safe systems of work, including a process flow of generic and specific risk assessments (from the client service) and dynamic risk assessment (highways crews).	Mark Holden Lorenzo Visentin/K eith Stone.	Will new road safety advisor address these points? Meetings indicate this position may not now being filled.	● G ⇔

	Train employees to deliver above.			

6. PLANNING FOR & IMPLEMENTING H&S MANAGEMENT

Produce written plans with targets for health and safety management implementation

THEME LEADER: 6a-6b - Rob Flinter, 6c6dd Jamie Morris/Dave Martin/David Brown

REF	REPORT			BY WH	IOM?		SIGNPOST	CURRENT
6	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
6a	HSE Report ref: R15 All Directorates should ensure that their health and safety action plans are reviewed and up-to- date.	Review and re- launch H&S action plan template. Review service planning guidelines to ensure that health and safety actions are a mandatory requirement in the service planning process.	1	ED's, Rob Flinter SHAW			Present template to be discussed with Tim Johnson Discussions with DK, present template should be reviewed then applied across all Directorates	• G
		Develop and initiate performance management monitoring process and reporting compliance via performance	1	Heads of Service and Head Teachers			H & s to be included Make up of performance boards inc	●A ⇔

		boards. Use standards determined within each SMS to develop specific local plans and arrangements at a level suitable to ensure most efficient control of H&S risk.		Directorate		Progress procedure for responsibilitie s All SMS to be reviewed by SHAW re new Corporate Manslaughte r Act	● A ⇔
6b	HSE Report ref: R16 The Council should produce a councilwide health and safety action plan with measurable objectives based on its priorities for health and safety management and taking into account	Corporate Action Plan to be developed to comply with our Health and Safety Management System Update to include findings from future	1	Rob Flinter SLT & SHAW SLT		SHIP in place and endorsed. Identified actions to follow on Propose this be addressed by meeting of new corporate h &	•G ①

	the findings of this audit. UAL HANDLING SPECI	inspections, including inspections by the fire regulator. As a minimum to include this improvement plan, and the HSE Priority Areas: Slips, trip and falls on the level; Violence; Stress; Manual handling; Working at height; and Work transport.	HSE stress report	All TU/HSE/ Walsall leaflet - anti bullying - new stress questionnaire -RA's New h & s person	s committee and Directorate H & S committees	A A A A C A C C C New road RA's safety advisor See comment under 5b
6c	HSE Report ref: R17 The Council should	Identify hoists and		Jamie	Progress report	•A

	ensure that its people handling training programme sufficiently covers the selection and use of hoists and slings and that there is a sufficient number of competent persons to deliver the training.	slings for people handling in use across the authority Identify numbers of persons who require training in the safe use of lifting equipment	2	Morris/Dave Martin/David Brown Heads of Service, Head teachers,	Internal/external trainers	
		Review LOLER SMS to ensure compliant and include in risk assessment process Identify required competency to train in use of hoist / sling	2	Service, head teacher SHAW and Head of Service, head teacher	Progress report required Internal/external	• A <
		Provide suitable resources for trainer or training (internal, external or mixed economy of training delivery matched to need).	2	SHAW Jamie Morris/Dave Martin/David Brown	Internal/external	★ ★ ♦
6d	HSE Report ref: R18 The Council should ensure that, in all	SAP to incorporate risk assessment on	0	Jamie Morris Dave Martin		•A

	premises where people are hoisted, there is a robust system for the selection of slings and for the communication of sling size and type to staff.	service user to identify the precise equipment required to assist mobility Slings to be used identified by unique reference number. Develop a written safe system of work	② ①	/David Brown Appropriate Head of Service, Head teacher		
		All staff trained in the system of work referring to risk assessments.	2			◆A ⇔ A
6e	HSE Report ref: R19 The Council should ensure that manual handling activities carried out by caretakers employed by them to work in schools have been	Appoint competent Manual Handling risk assessor for each premises or service (utilising cluster (or geographical)	1	Head teachers / Kevin Kendall	Who will train trainers and maintain competence	
	assessed and suitable control measures implemented.	groups to maximise cost/benefit). Nominated person to have CIEH risk assessment & CIEH	1		Where will they be trained (RoSPA?)	•A

Manual Handling training					\Leftrightarrow
Schools / Building Cleaning Services to ensure risk assessments adequately identify manual handling risks for caretakers in accordance with SMS and communicate those to staff and head teacher (safety co- operation).	1	Bill Gwilt		Link between RA's and SMS. Needs further work	•A \$
Develop safe systems of work		Gerry Butler		RA – write policy Risk assessment check present position/pos ts.	A
Roll out necessary training		Heads of Service and head teachers			•A

		Make provision for additional training resources			Int/ext Costings in financiual & staff	Int/Ext trainers A Identify costings
6f	HSE Report ref: 20 In Social Care premises manual handling risk assessments of non- client handling activities should be carried out.	Appoint competent Manual Handling risk assessor for each premises Nominated person to have CIEH risk assessment & CIEH Manual Handling training	Jamie Morris/Dave Martin/David Brown Appropriate Heads of SC&I service		Training / maintaining competency DM considerin g report compiled re training for Social Care	★★
		Ensure risk assessments adequately identify non-client manual handling risks for staff in accordance with SMS (such as kitchen and laundry			Ensure future design at planning stage includes users.	●A ⇔

		hazards).				
6g	HSE Report ref: R21 The Social Care Directorate should ensure that all slings used for lifting people are thoroughly examined by a competent person in accordance with the Lifting Operations and Lifting Equipment Regulations 1998 and that there is a system in place to ensure that this is carried out every six months.	Include statutory formal sling examination in schedule for Zurich Municipal LOLER inspection to ensure slings are subjected to thorough six monthly examinations and inspection and a record kept. Each location to nominate person(s)	1	Jamie Morris/Dave Martin/David Brown Ann Johnson	Named tester & records to be maintained at SHAW as well as locality.	◆ A ⇔
		at each location to: a) produce an inventory of all lifting equipment, including slings and hoists. b) give each sling an unique identification tag and Safe Working Load on it.		Appropriate heads of SC&I Services		

		A report of statutory examinations and inspections to be presented six monthly at Department Management Team Meetings or Performance Boards as determined in the directorate statement of intent. Status of thorough examination and inspections standing item on DMT agenda.				Progress of preparatory work. Named tester records to be kept at SHAW as well s locality. Progress required	A♦A♦
6h	HSE Report ref: R22 The storage and manual handling of items in the cellar area of the Central Library should be reviewed including the	Managers to ensure risk assessments suitably and sufficiently identify ALL manual handling, storage	1	Jamie Morris/Dave Martin/David Brown Sue Grainger Head of		All signed up to TU/Council/ HSE + RA's by competent person	●G ⇔

6i	risk of manual handling injury and falls. HSE Report ref: R23	and slips and falls risk Implement effective controls (using hierarchy of controls) for Manual handling and slips/trips SMS, eliminating the use of the cellar as first choice. Develop a safe systems of work where elimination cannot be reasonably carried out including necessary refurbishment and staff training.		Libraries & Heritage	Progress report required RA's implement findings	A \\ \tag{\tag{Prime} Implement findings}
	The Council should make arrangements	Update CDM SMS to include end users	1	Kevin Kendall,	Progress & methodolog	● G

	to ensure that, in future refurbishment	of all facilities to be consulted during		SHAW			Involve end	\Leftrightarrow
	and new build of kitchens, end users are consulted and manual handling risks are considered at the design stage.	design. Ensure that specifications for design consultants include an end-user consultation process		Kevin Kendall			users at pre planning stage	•G
		as a minimum. Review CDM SMS in line with CDM (Regs) 2007	1	SHAW			Protocol required (who will develop)	
		Implement requirements of CDM SMS.		Kevin Kendall			Process & methodolog y required. Progress?	●G ��
	S, TRIPS AND FALLS O	N THE LEVEL SPECIF	FIC PLANNII	NG AND IMPLE	MENTING		'	
6j	HSE Report ref: R24 The council should ensure that in schools where its employees work assessments of the risk of slips, trips and falls have been carried out and action plans including prioritisation of risks	Ensure slips, trips and falls on the level are considered in all relevant risk assessments Action plan produced & prioritised as	1	Kevin Kendall Appropriate heads of service and Head Teachers		Revise inline with HSE agreemen t	System of Education Walsall worthy of consideration	•A \$\paralle{\paralle}\$
	are in place.	required Nominated						Training, trainers – Int/Ext

6k	HSE Report ref: R25 The Council should	assessors trained to CIEH risk assessment level 3		SHAW, ED's, Appropriate		System of	
	ensure that there are systems in place for premises inspections including arrangements for the	devise H&S inspection schedules based on risk assessments and guidance in		heads of service, head teachers		target Education Walsall. Progress	●A ⇔
	monitoring of slip and trip risks at suitable intervals according to the risk.	both the 'slips & trips' and 'inspections' SMSs, and incorporate the inspection schedule in their H&S action plan for monitoring at service plan review and at Performance Boards.				report req SHAW to monitor centrally.	
		EDs to accompany managers on at least six inspection walkthrough tours per year.	①	EDs		New H&S structure committees to discuss.	●G ⇔
		Reports of inspections monitored by management teams	1	Heads of Service		New H&S committee. Progress? Performance	

		T		1	
presented at health				boards-	•G
and safety				confusion –	
committees and				roles and responsibilit	/
monitored via				ies.	\iff
Performance				103.	
Boards.					
Boardo.					
Inspections on					
health and safety committees and					
management					
meetings agenda as					●G ⇔
standing item					√ -/
				New	
Incidents related to				Corporate/Di	
slips & trips				rectorate h	
monitored at DMT				& s	
and H&S Committee				committees	
meetings					
ge					
1 manager per	\bigcirc				•G
service area to lead	\bigcirc			Naw as was	\iff
				New council & directorate	\ -\
inspections and to				H&S	
be trained in				committee	
workplace				plus	
inspection skills.				additional as	
				identified by	A
				directorates.	
					●A ⇔
					$\langle \Rightarrow \rangle$
				Progress	
				1 1091033	

					Names / training	
VIOL	ENCE AND AGGRESSI	ON SPECIFIC PLANNI	NG AND II	MPLEMENTING	,	
6I	HSE Report ref: R26 The risk of violence and aggression to caretaking staff in schools should be assessed. The council should ensure that there are adequate lone working procedures for its caretakers in schools and that they have received suitable and sufficient training in handling conflict, violence and aggression.	Ensure caretaker's job risk assessments include the consideration of the risk of violence and lone working Develop and implement a suitable lone working procedure (consideration must be given to using the lone worker system at Community Alarm Service as a minimum).	1	Kevin Kendall, Head teachers	Lone working procedures inc when alarm actuated (method of maintaining lone workers)	●A ⇔
		Any system used must be live tested (exercised) every 6 months, as a minimum, to check effectiveness (consideration must be given to using the Emergency Planning Unit to			Possible IT solution	●A ⇔

		independently test system efficacy). Relevant staff must attend CIEH Level 2 Award in Conflict Resolution and Personal Safety and a consideration of Personal Intervention Training (Breakaway Training) made.				Progress names of personnel Identify staff RA's etc training Int/Ext	△ A ↔
6m	HSE Report ref: R27 Where panic alarms are installed there should be a written protocol for response to alarms and staff	Identify all locations where panic alarms are installed Develop local	1	Jamie Morris/Dave Martin/David Brown Appropriate head of		6L 6n See 61	●A ⇔

_		1		1	1	1	
	should be trained and	procedure for	service,				\wedge
	adequately equipped	effective use and	Head				
	to deliver the required	planned response to	teachers				\iff
	response. This like	activated panic					√ -/
	other emergency	alarm (including					
	procedures should be	contingency plans					
	tested periodically.	for when staff on					
	,	holiday or ill					
		Staff trained in					
		following written					
		procedure					$lue{\mathbf{A}}$
		1					4 5
		Relevant staff must				Trainers,	\iff
		attend CIEH Level 2				Internal/Exter	
		Award in Conflict				nal?	
		Resolution and					
		Personal Safety and					$lue{\mathbf{A}}$
		where					4 \$
		Appropriate					\iff
		Personal					
		Intervention Training					
		(Breakaway					
		Training).					
		System tested at					
		least monthly (or					
		more frequently if					
		identified by risk					
		assessment).					lack
							\iff
							• •

6n	HSE Report ref: R28 The Council should undertake an assessment of the risk of violence and aggression in Social Care premises and consider whether panic alarms/staff attack systems are required.	Ensure risk assessments adequately identify the levels of violence Consider history of violence by service users and amend individual care plans where necessary. Develop local system to ensure staff can raise alarm quickly in the event of any attacks	"Upgrade" Charging clients	Jamie Morris/Dave Martin/David Brown Appropriate Heads of Service		Discussion with SOH Nurse — identified the potential for violence & serious injury, to certain children's care centres Include advice when police should be advised /	• R
		Install system to ensure staff can raise alarm in premises where required. Comply with requirement of section 6m if installed.				Who to? What procedures And procedures for response see 6I & 6m	‡

						SHIP 6m	
60	HSE Report ref: R29 The Council should review its procedures for reporting incidents of verbal aggression.	News and Views to feature existing definition of verbal violence, reporting procedure and refer to 'reporting incidents' SMS. HRD portal to alert managers to 'reporting incidents' SMS and to review local arrangements. Managers to cascade News and Views information to teams. Managers to	2	Jamie Morris/Dave Martin/David Brown SHAW Lisa Hemus		6 <i>n</i> 6 <i>l</i> 6 <i>m</i>	 A ↓ A ↓ A ↓
62	USE Donort roft D20	monitor monthly the reported level of verbal aggression in their teams.		managers			● A
6р	HSE Report ref: R30 The Council should review the level of training required in	Analyse the training requirements for all customer facing	①	Jamie Morris/Dave Martin/David		6l 6m 6n	•A

handling conflict	staff based on:	Brown		Progress	
handling conflict, diffusion techniques		DIOWII		required	
	 risk assessment; 	Annroprioto			, ,
and breakaway	analysis of	Appropriate			
training for staff	proactive &	heads of			
exposed to the risk of	reactive	service and			
verbal and actual	monitoring	Head			
violence and	based on type of	teachers			/_
aggression.	contact				√ - /
	(telephone, face				
	to face, off site				
	(home visits or				
	working in				
	another's				
	premises), or				
	electronic (texts,				
	emails)),				
	• which				
	departments				
	would be				
	affected in each				
	sector; and				A
	· ·				U A
	 what control 				/_
	measures are				\Leftrightarrow
	needed.				
	The risk assessment				
	should identify the				△ ∧
	type of training				•A
	required, this could				\Leftrightarrow
	be theory or			Int/Ext who is	_/
	practical training			to provide the	
	e.g. Breakaway			training	
	techniques.				
	'				
				1	

_	K-RELATED STRESS A also S1 and S2 below)	Develop and resource suitable training plans to achieve control.	NCE SPECI	FIC PLANNING	AND IMPLEMEN	NTING	Int/Ext	
6q	HSE Report ref: R31 The stress questionnaire should be rolled out to all areas.	Resource and appoint lead officer to co-ordinate the survey and set up steering group	1	Jamie Morris/Dave Martin/David Brown	Lorenzo and Occ. Health		S1 S2 Progress on appointment of psychologist and instruction. Who will	•G ①
		Recruit work health psychology officer to support roll-out of questionnaire, analysis, risk assessment compilation, focus group facilitation and assist managers with control measure planning.	1	Work health Psychology officer, check with Lorenzo Visentin			address stress questionnaire outcomes	•G ①
		Prioritise and schedule roll-out of stress survey for all areas of council. (Priorities should be	2		Which directorates		Council wide stress questionnaire	•G

		based on sickness absence records and other stress incidence data).				Trade Union sign up to proposals	①
6r	HSE Report ref: R32 The council should ensure that assessments of the risk of work-related stress are carried out	Enhance questionnaire / risk assessment electronic interface.	1	Jamie Morris/Dave Martin/David Brown		6q	●G \$\psi\$
	in all areas and that action plans have been produced to address the risks found.	psychology team to set up a focus group with relevant staff groups in each identified survey area to examine results of stress survey and suggest practical solutions for consideration.	2	Appropriate heads of service, service managers, Head teachers,		Team comprise of?	G €

		manager to complete existing control measures section of risk assessment (recognising their inadequacy). Work health psychologist to discuss staff solution proposals with relevant manager for inclusion in stress risk reduction action plan.	2	work health psychology officers		Progress report required Requiring progress. J New position?	A (t) G (t)
6s	HSE Report ref: R33 The Council should, in conjunction with trade unions and PPC Resource, the current provider, raise awareness of the employee assistance programme and promote the confidentiality of the service.	PPC Resource leaflet included in the pre-employment packs for new starters. Review induction guidance and ensure employee assistance programme services	2	Jamie Morris/Dave Martin/David Brown Lisa Hemus		Presentation to TU corporate H&S committee 9/10/2007, 4 th December 2007. Suggestion for a Posters to	Discussion at TU H&S committee and presentation given by PPC

are included, including telephone and internet access routes.	Gerry Butler	be sited in each Toilets
PPC Resource to organise workshops for trade unions to include confidentiality of the service. PPC Resource to present at management forum six monthly, with focus on utilisation rates and reasons for using the service, together with a detailed focus on one aspect of the service each forum.	PPC Resource	Addresses at Corporate H&S committee
PPC Resource information displayed on health and safety notice boards.	PPC Resource	

				All service managers and trades union			●G ①
6t	HSE Report ref: R34 The sickness absence policy and procedure should be reviewed to take account of the need for management and Occupational Health interventions arising from some causes and types of ill health irrespective of the length of absence.	Review sickness absence policy and procedures to ensure appropriate intervention periods for some types of ill health. Day one referral for work-related stress absence cases. Week one referral for all work related musculoskeletal cases.	2	Jamie Morris/Dave Martin/David Brown Caroline Lawrence HR Account Manager, Replacement Occ Health nurse SHAW		A robust active plan was agreed by SLT week December 3 rd 07	G ♦ ♦
							A

							\Leftrightarrow
6u	HSE Report ref: R35 The Council should ensure that it has a system for monitoring and managing work-related stress and other work-related sickness absence in its employees who work in schools.	Resource a suitable stress survey in schools, using National Wellbeing Programme from Teacher Support Network. Commission services to provide pastoral support to headteachers Co-ordinate TSN activities with work	1	Jamie Morris/Dave Martin/ David Brown Louise Hughes		Progress has appointment been made? 6s	●A ⇔
		health psychology teams, OH and PPC Resource.		Paul Smith			●A ⇔
6v	HSE Report ref: R36 The Council should review the system of exit questionnaires for staff moving internal departments and	Workforce Planning team (HRD) to implement system to monitor exit and departmental	1	Jamie Morris/Dave Martin/David Brown Lisa Hemus /		6r A report went to SLT last week, work continues to	●A ⇔

RISK 6w	leaving the authority, and how this information can be used to inform stress risk assessments. ASSESSMENT SPECIFIES Report ref: R37	transfer questionnaire. Produce quarterly reports of trends and other significant findings to HR performance board and work health psychology team Work health psychology teams to interpret information provided to assist heads of service update their relevant stress risk assessments.	IPLEMENT	Lorenzo Visentin / Work Health Psychology Officer		mandate the process of exit questionnaire s	
	The Council should ensure that all areas have carried out suitable and sufficient	SHAW to continue on-going SMS auditing as planned.	0	Jamie Morris/Dave Martin/David Brown		Discussions indicate that CE & Directors along with	•G

	risk assessments. This can be achieved through ensuring the setting of specific management objectives and the monitoring of those objectives.	Each service area to include a matrix of their risk assessments in the health and safety action plan, highlighting outstanding corrective actions. Each service's performance board to monitor completion of risk		Policy makers, Planners, Implementers, Rob Flinter Performance Management	their close staff should ensure their jobs are RA SHIP 3a, 6a, 2a	⇔ A ⇔
		assessments, their currency and closing out of any identified corrective actions.				●A ⇔
		One manager per service area (as a minimum) to have risk assessment maintenance included in their IPM target setting process.			Where is the Responsibility for this?	●A ⇔
6x	HSE Report ref: R38 Actions to be taken as a result of risk	As above – as part of the process	0	Jamie Morris/Dave	One risk	

			_		 	1
	assessment	through 6w		/lartin/David	assessment form to be	lack
	(additional control			Brown and	used by all.	
	measures) should be			As above	DM check all	\iff
	recorded and				Directorates	\ - \
	monitored.	Records to be made			using the	
		by the manager			same	
		identified in 6w			template/form	
		above.				$lue{\mathbf{A}}$
		above.			Ensure risk	
					assessment	\Leftrightarrow
					form in use	•
		Manitania a las de a			All trained to	
		Monitoring by the			understand	
		relevant			use and	
		performance board			reporting	
		quarterly.				
						U A
						√- /
		SLT performance				
		board to dip sample				
		compliance in				
		individual				
		directorates				
		quarterly.				lacksquare
		quality:				
						\Leftrightarrow
						1
ШСЫ	WAYS SPECIFIC PLAN	INING AND IMDI EMEN	ITING			
6y	HSE Report ref: R39	INING AND IMPLEMEN				
Uy	The risk management	Review Health and	1	Mark Holden	SHIP 5b	lacksquare
	system in Highways	Safety Plan		Streetpride		_
	System in Filgriways	Jaicly Flair		Streethine		

	should be reviewed and measures implemented to ensure there is a robust system for managing risks to workers.	Monitor progress against plan		Head of Service and Service managers	Appointment of new highways advisor. See comments in 5 as to whether this position is to be filled	\$
6z	HSE Report ref: R40 The Council should review the provision of Health and Safety support and competent advice to the Highways and Street pride Highways departments.	Nominate depot coordinator to provide local Health and Safety support to Street pride teams at North Walsall Depot. Appoint dedicated highways safety officer.	1	Mark Holden Head of Streetpride and Service managers	New appointment – decision on depot taken J	G
		Review health and safety training needs of managers and employees All Streetpride managers to		SHAW / Street pride managers Head of	Progress report required	G

EDIV	CATION SPECIFIC PLA	complete IOSH Managing Safely within six moths.	NTING	Streetpride		● A ⇔
6aa	HSE Report ref: R41 The Council should implement a robust structure and appropriate arrangements in order for it to be able to ensure the effective management of health and safety in schools where its employees work.	Revised contract with an education provider will include health and safety management (from July 2008). SERCO TAS appointed as interim schools safety adviser. • COMPLETE	1	LouiseHughes ;Kevin Kendall SHAW Karen Adderley; (Education Services Commissionin g Project); SHAW Louise Hughes;	Progress report required. SHAW involvement.	●G ⇔G û
6bb	HSE Report ref: R42 The Council should review the need for a provision, within the	Review how health and safety requirements and	0	Louise Hughes Melanie	New council H&S committee &	● A

	local fair funding scheme, to require schools to fund health and safety requirements and a system to monitor and manage this.	systems can be monitored and managed. Explore revision of the local fair funding scheme.		Harmitt (School Finance) / Education Services Commissioning Project, SHAW	directorates ref to SHAW should be involved in link between new system and CE/Directorat es	●A ⇔
6cc	HSE Report ref: R43 The Council should review and clarify the schools risk register and how this is used by schools, Education Walsall and the Council to plan works and manage risks.	Develop risk register for schools.		Louise Hughes	6bb Progress	●A ⇔
6dd	HSE Report ref: R44 The Council should ensure that there are adequate arrangements to manage the risk of work at height to its	Review school specific safety documents to ensure the arrangements for working at height	1	Kevin Kendall Chris Halliday SHAW	6bb 6cc	● A ⇔

employees in schools.	are adequate			

7. MEASURING HEALTH AND SAFETY PERFORMANCE

Monitoring before and after things go wrong

THEME LEADER:
David Kempson

REF	REPORT			BY W	/HOM?		SIGNPOST	CURRENT
7	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
7a	HSE Report ref: R45 Appropriate arrangements should be made and recorded for the proactive monitoring of health and safety in all Directorates.	Health and Safety to be a standing item on all performance board and management team meetings from SLT down	1	SLT, AD's, Heads of Service, Head Teachers, line managers			New Council H&S Committee & Directorate H & S committees	●G ①
		Item to include progress against H&S plans, feedback from inspections, accident investigations, training requirements and activities.	1				Measuring / Audit	•G ◆

		Recruit safety compliance auditors to increase SMS auditing.	1	Paul Smith SHAW		Internal/External?	●A ⇔
7b	HSE Report ref: R46 The Council should ensure that there is regular reporting of health and safety management progress and standards assurance into the Strategic Leadership Team by a senior manager.	Develop a direct reporting route from SHAW to SLT, by realigning SHAW within the organisational structures either (in order of preference):		SLT		New proposed structure Council & Directorate SHAW position. SHAW positioned between Corporate H&S and Corporate Management Structure DM schematic for consideration	●A ①
		1) in CEx dept; 2) Create a Head of Service, SHAW within performance management				To be determined	•A

		service; or 3) Direct line reporting to head of HRD service. Recruit senior safety manager to carry this out.			What progress on this appointmen <i>t?</i>	●A <⇒
7c	HSE Report ref: R47 The results of Occupational Health surveillance should be used as part of its system for monitoring the control of health risks to employees.	Identify through risk assessments employees requiring statutory health surveillance	① ·	Heads of Service, Head teachers, service managers, line managers	J Occupational Health has this been identified yet?	●A ⇔
		Develop statutory health surveillance procedure Identify and make available resources to	1	SHAW (OH)	Data base required DM discussions with Tracy Davis. Draft Walsall Council Occupational health Procedure Manual	• G

the causes of	from SLT down,	managers	Council H&S	
accidents and incident	centrally reported		Committee &	
trends and the	to SHAW.	SHAW	Directorates.	
effectiveness of its			New reporting	
health and safety			position to	
arrangements.			SHAW.	
	Quarterly			
	summary		0.7.	
	reporting by		SLT to consider SHAW position	
	SHAW to SLT.		SHAW position	
				●G ⇔
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8. AUDITING PERFORMANCE Looking to see if our safety management systems are achieving the right results. THEME LEADER: Tim Johnson

REF	REPORT			BY W	HOM?		SIGNPOST	CURRENT
8	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
8a	HSE Report ref: R49 The Quality Assurance Environment Audit system should be implemented in all care homes and senior	Identify locations which require audit	1	Dave Martin			Progress report required	♦
	management should monitor these audits.	Identify competence to conduct audit		Dave Martin and SHAW			Identify who will carry this out?	● A ⇔
		Appoint internal / external persons to conduct audit		Dave Martin				• A
		Management monitor audit		SC&I				‡
				Managers				● A ⇔

8b	HSE Report ref: R50 Arrangements for auditing the health and safety management system in all Directorates should be reviewed and responsibilities for	Review of current audit system. Consideration of	1	SHAW	New Council H&S & Directorates should discuss	• G
	undertaking audits allocated and recorded.	adoption of social care's Quality Assurance Environment Audit document and process for each council building.		SLT	External Audits	INT/EXT Audits

S1. CORPORATE STRESS IMPROVEMENT PLAN Making organisational-level interventions on our commonest cause of sickness absence THEME LEADER: Lorenzo Visentin

REF	REPORT			BY W	HOM?		SIGNPOST	CURRENT
S1	RECOMMENDATION	IMPROVEMENT	PRIORITY	MANAGER	PORTFOLIO	BY	TO OTHER	STATUS \
	OR ISSUE	ACTION	1 2 3	David Ossid	HOLDER	WHEN?	PLANS	TARGET
S1a	Deliver a corporate consistent approach to stress management	Create work health psychology post (new post at SO1-38)	1	Paul Smith	A Griffiths	30.09.07	HRD Transformation roadmap	COMPLETE
		Review stress SMS	①	Lorenzo Visentin	A Griffiths	30.09.07		COMPLETE
		Review 'strong workplace' questions in 2007 employee survey and include in future survey specifications	2	Lorenzo Visentin	A Griffiths	31.10.07		COMPLETE
		Deliver ED/AD briefing series on SMS and improvement plan Secure trades	1	Lorenzo Visentin	A Griffiths	28.02.08	Pending arrival of new CEx in Jan 08	•G

union and partner buy-in (equalities team [welfare to work], tPCT [Carol Lakin mental health team], and Zurich Municipal in order to access available funding opportunities)	1	Caroline Lawrence, Lorenzo Visentin & Ann Johnson	A Griffiths	28.02.08	Discussions required with Zurich Municipal.	
Explore potential for HRD Direct to alert OH to first day report of stress related sickness, via worktasks report mechanism	2	Lisa Hemus	A Griffiths	31.03.08		•G ≎
OH to refer team managers of staff with WRS to work health psychology team – enabling preventative approach at organisational not individual level.	2	Replacement Occ health adviser (post vacant)	A Griffiths	31.03.08	Pending new appointment. J 6Q 6R	♦

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S1b	Pilot the full safety management standard for stress within Social Care & Inclusion Directorate (anonymous survey	Communicate stress survey results and risk assessment forms to services heads and AD	1	Lorenzo Visentin & Surinder Singh	B McCracken	31.10.07	6Q 6R	COMPLETE
	and risk assessment work already started).	Carry out focus groups with staff in each risk assessment staff grouping	1	Lorenzo Visentin & Work Health Psychologist	B McCracken	14.12.07	J	COMPLETE
		Complete existing control measures (historical record)	1	Relevant AD and Service Manager	B McCracken	31.12.07		•G
		Analyse focus group proposed solutions and fwd recommendations to relevant mgr	2	Lorenzo Visentin	B McCracken	14.12.07		⇔ G fr
		Complete stress risk reduction action plans per	①	Relevant AD and service	B McCracken	31.12.07	6R 6S 6V	

		team		manager				
		Monitor action planning and real activity at three months	2	Lorenzo Visentin	A Griffiths	31.03.08		• G •
		Deliver 100% follow-up survey action at 12 months (November 2008)	1	ISS e-form and database team	A Griffiths	30.11.08		●G \$
								●G \$
S1c	Create project plan to deliver stress survey, risk assessment, staff focus group and risk reduction planning for all directorates	Walsall Project approach compliant project plan developed by January 2008	1	Work Health Psychologist	A Griffiths	31.01.08	J 6R 6S 6V	•G \$\psi\$
		Deliver FRD and associated						

		documents to ED champion, SLT and ERF by February 2008 Engage EDs and their DLTs in line with project plan gantt.	1	Work Health Psychologist Work Health Psychologist	A Griffiths A Griffiths	28.02.08 Various up to Dec 2008		•G ⇔ •G ⇔
S1d	Make arrangements to achieve those aspects of the project plan detailed in S1c above.	Achieve through actions in S1a and S1c						●G ⇔
S1e	Make arrangements to deliver suitable and sufficient staff and manager training	Carry out training needs analysis per directorate Develop work health psychology team competence to deliver CIEH Foundation Certificate in	2	Gerry Butler Lorenzo Visentin	CIIr A Griffiths CIIr A Griffiths	31.03.08 31.03.08	Leadership and development strategy	•G ⇔ •G ⇔
		Stress Awareness Ensure that existing safety training officers are competent to	2	Lorenzo Visentin	CIIr A Griffiths	30.11.07		

		support delivery of this training. Secure directorate funds for CIEH Foundation Cert. in Stress Awareness.	2	Gerry Butler	CIIr A Griffiths	30.11.07	Funds exist in current budget	COMPLETE
S1f	Make arrangements to identify staff starting sick leave for reasons of WRS, create capacity for day one referral to OH to prioritise individual (employee) level interventions	Explore HRD portal capability of alerting work health psychology to day one sickness absence for LGE category of mental health absence through 'work tasks' email alert.	1	Paul Smith, Lorenzo Visentin, Lisa Hemus	CIIr A Griffiths	31.03.08		•G \$
S1g	Contact managers of staff identified in S1f to prioritise organisational level preventative interventions in that work area/service team.	Telephone calls to manager to explore reason for absence check progress to date on stress risk assessment and plan corrective action meeting if needed (organisational level	2	Work Health Psychologist	CIIr A Griffiths	Dependent on S1f		●G ⇔

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		intervention).						
		Manager to make day one referral to OH for staff member. (Individual level intervention).	2	Paul Smith	CIIr A Griffiths	Dependent on S1f	Capacity in OH required to deliver this element	•G
		OH to establish Work-relatedness, and refer manager to work health psychologist for	1	OH clinical staff	CIIr A Griffiths	31.12.07	Pending appointment of work health psychologist	\$
		concurrent organisational level intervention.						●A û
S1h	Complete commitment to HSE Health Psychology Unit to supply Social Care raw data to create national norm data.	Work health psychologist to maintain relationship with specialist HSE unit.	3	Work Health Psychologist	CIIr A Griffiths	Ongoing	J Recruit Psychologist	●G ①
	add.	Data to be supplied in acceptable format at a frequency to be determined.	3	Work Health Psychologist	CIIr A Griffiths	31.03.08	Format agreed by date, then ongoing	G ◆

	Social care data to be sent to HSE Health Psychologists	3	Lorenzo Visentin	CIIr A Griffiths	30.11.07		COMPLETE
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S2. SOCIAL CARE STRESS IMPROVEMENT PLAN Delivering focussed improvements to social care staff following their stress survey. THEME LEADER: Lorenzo Visentin

REF	REPORT			BY WI	JOM2		SIGNPOST	CURRENT
	RECOMMENDATION	IMPROVEMENT	PRIORITY	MANAGER	PORTFOLIO	BY	TO OTHER	STATUS V
S2	OR ISSUE	ACTION	1 2 3	_	HOLDER	WHEN?	PLANS	TARGET
S2a	The results of the recent stress survey should be used to prioritise areas of potential risk and inform the action	All team survey results to be converted to risk assessments by 31/12/07.	1	Lorenzo Visentin	CIIr B McCracken	31.12.07		●G ①
	planning process for the management of stress in the Directorate.	All risk assessments to have existing control measures section completed by relevant manager by 31/12/07.	①	Relevant social care managers	CIIr B McCracken	31.12.07	J 6Q 6R 6V 6U	●G ①
		All teams to have completed solution focus groups by 14/12/07.	2	Lorenzo Visentin	CIIr B McCracken	14.12.07		COMPLETE
		All managers to have mapped out action plan by 31/12/07.	3	Relevant social care managers	CIIr B McCracken	31.12.07	J	•G

		Action plan to be closed out by 31/07/08.	3	Relevant social care managers	CIIr B McCracken	31.07.08		矿
		Repeat anonymised survey November 2008.	3	Lorenzo Visentin	CIIr B McCracken	30.11.08		●G ⇔
								●G ⇔
S2b	The Directorate should carry out assessments of the risk of work-related stress in all areas, in consultation with staff and employee representatives and produce and	Consultation process with trades union via corporate TU forum, Social Care H&S Boards. Staff focus	2	Lorenzo Visentin	CIIr B McCracken	30.09.07	S2a J 6Q 6R 6U 6V	COMPLETE
	implement action plans to address the findings.	groups used in 100% of areas to suggest practical solutions for managers' action plan.	2	Lorenzo Visentin	CIIr B McCracken	14.12.07		COMPLETE

S2c	The application of the flexible working system across the departments and locations in Social care should be reviewed.	Flexible working policies to be promoted at social care induction events.	3	Dave Martin, Heads of Service and OD.	Cllrs B McCracken & A Griffiths	31.03.08		• G
		Directorate News section of News and Views to promote flexible working patterns.	3	Dave Martin	CIIr B McCracken	28.02.08		• G
S2d	Communication of information to staff and service users regarding provision of services should be reviewed.	All SMB decisions to be risk assessed with considerations for elements of work pressure: Demands Control Support Roles Relationships and Change and regularly communicated to staff		Dave Martin and Darren Caveney	CIIr B McCracken	31.01.08 & ongoing		G ⊕ €
		Work health psychologist to		Lorenzo Visentin &	CIIr A	31.01.08	J Recruitment of new	

		assist SMB with relevant aspects of stress risk management.	1	Work Health Psychologist	Griffiths	& ongoing	psychologist	●G ⇔
S2e	The impact upon staff of changing working procedures around the provision of services and funding panels should be reviewed.	Further exploration of this issue to be led by SMB and relevant professional groups.	①	Dave Martin	CIIr B McCracken	31.01.08	Return of DM (Interim CEx to ED SC)	●G ♦
S2f	Potential areas of role conflict and conflicting demands should be reviewed.	As part of the stress risk assessment process in S2a.	①	Lorenzo Visentin	CIIr A Griffiths	31.12.07		COMPLETE
S2g	Staffing levels in relation to demands, and their potential impact on work-related stress should be reviewed.	As part of the stress risk assessment process in S2a. Consideration should be given to establishing minimum staffing levels to field teams as well as centre based staff.	1	Lorenzo Visentin Dave Martin	CIIr A Griffiths CIIr B McCracken	31.12.07	S2a J 6Q 6R 6U 6V	G COMPLETE

S2h Rec 4	The Council's anti- bullying procedure should be reviewed and a clear formal policy put in place.	Deferring to the corporate safety improvement plan. HRD commissioned to produce corporate policy. Social Care will ensure all managers and staff are informed of the policy and training given where appropriate once the bullying policy has been written and adopted across the council.		Paul Smith			S1 – S2 J In progress DM Caroline Lawrence/Julie Black. Anticipated implementation April 08	●G ①
S2i	The Directorate should ensure that the support it provides for staff (including team meetings, supervision and information about the employee assistance programme) is maintained across all areas/departments.	Social care performance board to require each service to report on completion rates, including seeking a compliance report from corporate performance	1	Chair of Performance Board; Heads of Service	CIIr B McCracken	31.03.08		•G ⇔

	management (Completion) and organisational development (development plans submitted).					
	Social care performance board to require corrective action to remedy shortcomings if any.	①	Chair of performance board	CIIr B McCracken	31.03.08 & ongoing	
	Social Care performance board to monitor coverage of these items across the service on a	1	Heads of Service	CIIr B McCracken	31.03.08 & ongoing	● G ◆
	quarterly basis.					●G ◆

F1. FIRE SAFETY IMPROVEMENT PLAN

Develop a fire safety management system in response to the Regulatory Reform Order.

THEME LEADER: Keith Stone

REF	REPORT			BY W	HOM?		SIGNPOST	CURRENT
F1	RECOMMENDATION OR ISSUE	IMPROVEMENT ACTION	PRIORITY 1 2 3	MANAGER	PORTFOLIO HOLDER	BY WHEN?	TO OTHER PLANS	STATUS V TARGET
F1a	Nominate a 'responsible person' for each premises, (the employer and any other person who may have control of any part of the premises (e.g. the occupier)).	Each directorate to identify a building manager for each of the premises they occupy by 31/07/07.	1	EDs	All portfolio holders			♣ ↓
		Building manager / responsible person list to be collated centrally by Property Services by 31/08/07.	2	Kevin Kendall				↓ ↓
F1b	Carry out a fire risk assessment paying particular attention to the disabled and those with special needs, as well as any dangerous substances on the premises.	The responsible person is to familiarise themselves with the relevant DCLG fire safety guide for their type of premises (see fire SMS for links).	1	Responsible persons			J 2 New fire advisors, plus 2 further until end of this financial year Meeting SFPO West Midlands. Council	●R

The responsible person should	1	Responsible persons	Interviewed under PACE	
carry out a level 1 fire risk assessment using the relevant fire risk assessment checklist and form from the intranet.			Following decision by SLT re additional Fire Advisors David Brown/LV to discuss with West	●A
Commission a suitable		Head of service or	Midlands FRS	
competent organisation to		head teacher		
conduct a detailed level two fire risk	2	teacher		•A
assessment where necessary (for <u>all</u> but the				●A ⇔
smallest and lowest risk			J	
buildings).			New fire advisors	
			Recruitment	
			in progress	
			Fire advisors	
			or competent organisation	
			do all	
			DM proposed agree	
			template for	
			Level 2 FRA	
			with West Midlands	
			FRS,	

						estimate time required to complete and discuss also with West Midlands FRS	
F1c	Make arrangements to comply with the outstanding actions from the level 1 and level 2 fire risk assessments.	Refer to the appropriate fire safety guide for your type of building (from DCLG website) in order to compile a suitable fire action plan.	1	Responsible persons		J	Û A
		Refer to the 'evacuation of disabled employees & visitors guidance' and 'preparing a fire evacuation plan' to prepare relevant fire evacuation plan(s).	2	Responsible persons		J	●A ⇔
		Complete the 'annual fire safety	1	Responsible persons		J	•A

		briefing document'. Inform employees accordingly and record. Review 'guidance on fire warden duties'. Nominate a suitable number of staff at each location to carry out 'evacuation supervision duties'. They will be known as fire wardens. Brief fire wardens on their duties and record.		Head of service or head teacher	Responsible Person Wardens Extinguisher Training Int/Ext FRA report to SLT re 1-3 years	
		Complete any corrective actions from the competent person level 2 fire risk assessment.	2	Responsible persons		●A ⇔
F1d	Each responsible person is to maintain a suitable fire maintenance log.	Complete the necessary 'fire maintenance log' from the intranet, and keep this document up to	1	Responsible persons	J	●A ⇔

		date.					
F1e	Put in place measures to fight fires in the workplace. Failure to attempt to fight fires is a (new) criminal offence.	A suitable and sufficient number of staff at each location must be identified for fire extinguisher training. (Not fire wardens who will continue to ensure the safe evacuation of people). The number identified and trained must ensure adequate cover at all points in each building and be able to cover for sickness, holidays and so on. They will be known as fire extinguisher marshals.	1	Responsible persons		J	A ⇒ A
		Fire extinguisher marshals must be trained by competent persons using extinguishers on real fire situations	2	Service manager		J	• A

			in controlled circumstances. All fire extinguisher marshals will receive a nominal payment for their duties.	3	Head of service or head teacher		1	
-	F1f	Provide suitable and sufficient information, instruction and training for all employees in fire safety and fire precaution matters.	All employees must complete fire safety awareness training which will include the theoretical sue of extinguishers.	1	Head of service or other recruiting manager and OD		J New fire advisors	⊕A (t)