4TH NOVEMBER 2011 AT 1000 HOURS COMMITTEE ROOM ONE

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Sherwood Lodge Bolsover Derbyshire S44 6NF

Date: 20th October 2011

Dear Sir or Madam,

You are hereby summoned to attend a meeting of the Safety Committee of Bolsover District Council to be held in Committee Room One Sherwood Lodge, Bolsover, on Friday 4th November 2011 at 1000 hours.

Members are reminded that under Section 51 of the Local Government Act 2000 the Bolsover Code of Conduct was adopted by the Council on 16th May 2007. It is a Councillor's duty to familiarise him or herself with the rules of personal conduct by which Councillors must conduct themselves in public life. In addition, Members should review their personal circumstances on a regular basis with these rules in mind <u>and</u> bearing in mind the matters listed on the Agenda for discussion at this meeting.

Copies of the Bolsover Code of Conduct for Members will be available for inspection by any Member at the meeting.

Register of Members' Interest - Members are reminded that a Member must within 28 days of becoming aware of any changes to their interests under paragraph 14 or 15 of the Code of Conduct provide written notification to the Authority's Monitoring Officer.

Members are reminded of the provisions of Section 106 of the Local Government Finance Act 1992 and the responsibility of Members to make a declaration at this meeting if affected by the Section and not to vote on any matter before this meeting which would have an affect on the Council's budget.

You will find the contents of the agenda itemised on page 48.

Yours faithfully,

Chief Executive Officer

To: Chair and Members of the Safety Committee

Minutes of a meeting of the Safety Committee of Bolsover District Council held in Committee Room One, Sherwood Lodge, Bolsover, on Monday 25th July 2011 at 1400 hours.

PRESENT:-

Members:-

Councillors P.M Bowmer and B.R. Murray-Carr.

Unison:-

C. Gilfillan, J. Hendy and A. Lowery.

Unite:-

C. Dodsworth and S. Sambrooks.

Officers:-

L. Keeling (Head of Human Resources and Payroll), P. Campbell (Head of Housing) (from minute no.247 to minute no.249), T. Walker (Health and Safety Officer) and R. Leadbeater (Democratic Services Officer).

238. APOLOGIES

Apologies for absence were received from Councillors Clifton, Gilmour and McGregor.

239. ELECTION OF CHAIR

Moved by C. Gilfillan, seconded by C. Dodsworth **RESOLVED** that A. Lowery be elected as Chair for the ensuing year.

A. Lowery in the Chair

240. APPOINTMENT OF VICE CHAIR

Moved by Councillor B.R. Murray-Carr, seconded by Councillor P. M. Bowmer **RESOLVED** that Councillor D. McGregor be appointed as Vice Chair for the ensuing year.

241. URGENT ITEMS

There were no urgent items of business to consider.

242. DECLARATION OF INTEREST

There were no declarations of interest submitted.

243. MINUTES - 18TH APRIL 2011

Moved by Councillor B. R. Murray-Carr, seconded by Councillor P.M. Bowmer **RESOLVED** that the minutes of a meeting of the Safety Committee held on 18th April 2011 be approved as a true record.

244. TERMS OF REFERENCE

Moved by Councillor B. R. Murray-Carr, seconded by Councillor P.M. Bowmer **RESOLVED** that the Terms of Reference for the Safety Committee be agreed.

245. SICKNESS ABSENCE/OCCUPATIONAL HEALTH STATISTICS 2010/2011

The Head of Human Resources and Payroll presented the report to update the Safety Committee on the sickness absence/occupational health statistics for 2010/11.

The meeting was advised that the outturn for sickness absence for 2010/11 was 7.97 days per FTE compared with 8.39 days per FTE for the previous year.

The Head of Human Resources and Payroll provided amended figures in respect of the days lost as a result of the top three causes of sickness absence.

Muscular Skeletal 1137 days Stress 483 days Infections 447 days Total 2067 days

There had been an increase in absence through muscular skeletal problems, however only two of these were due to work related injuries.

Moved by Councillor B.R. Murray-Carr, seconded by C. Gilfillan **RESOLVED** that the report be received.

246. GENERAL HEALTH AND SAFETY REPORT

The Health and Safety Officer presented the report to update the Safety Committee on a number of health and safety issues and to seek approval of the draft Electricity at Work Policy and other amended policies.

Stress Risk Assessments

Four departments had now raised issues which were currently under consideration by the relevant managers.

Health and Safety Audit

The recent Health and Safety audit had been completed and rated 'Satisfactory'. Three points had been identified for action:

Benchmarking – The Health and Safety Officer had been requested to seek other similar authorities to benchmark health and safety performance against.

Workplace inspection – Heads of Service had been reminded to comply with the predetermined inspection timetable.

Policies – Policies in need of significant updating had now been completed. In future, policy reviews would take place every three years rather than every two, unless legislative or organisational structure changes necessitated an earlier review.

The Chair advised that Street Cleansing, Grounds Maintenance and Refuse Collection were currently benchmarked through the APSE Referral Network. This service could be bought into for all front line services to provide performance network returns based on data from other authorities. It was added that there would not be any additional financial outlay for the Council as the fees currently

paid would cover any further services added to the scheme. Members requested that this facility be explored further with the Director of Neighbourhoods.

Questions were raised with regard to whether the Safety Committee was routinely informed of polices that had been reviewed. The Head of Human Resources advised that this was provided as a list included within the General Health and Safety Report presented to the Safety Committee. It was added that the biennial review of policies had been considered an unrealistic target and the decision had therefore been taken to extend the review period to three years. Any policy could still be reviewed at any time deemed necessary.

Moved by Councillor B.R. Murray-Carr, seconded by C. Gilfillan **RESOLVED** that the Chair of the Safety Committee discuss the possibility of APSI Referral Network benchmarking across front line services with the Director of Neighbourhoods.

(Chair of Safety Committee/Director of Neighbourhoods)

Improvement Notice Action Plan (Vibration)

The Chair advised that vibration measuring equipment was in place for Street Services and Grounds Maintenance personnel which enabled staff to monitor safe vibration levels throughout the course of their working day to prevent overexposure. Unite representatives advised that this procedure had not been implemented for Housing Repairs staff. The Chair suggested that this be raised with the Head of Housing/Director of Neighbourhoods.

(Chair of Safety Committee/Director of Neighbourhoods).

Electricity at Work

Concerns were raised by union representatives in respect of the Electricity at Work policy presented for the Committee's approval. These concerns were particularly related to the sections dealing with 'live working'. The Committee was advised by union representatives that other than for the purpose of testing, there would be no circumstances where a need to work on a live system existed.

Moved by C. Dodsworth, seconded by Councillor B.R. Murray-Carr **RESOLVED** that the draft Electricity at Work Policy be amended as follows:

Section 4 - Policy Statement Bullet point number 5

Retain the words 'Forbid live working' and delete 'unless absolutely necessary in which case a permit to work must be issued before work begins'.

Section 7 - Safe Systems of Work 7.9 Live Working

This section to be removed in its entirety and replaced with the words

'Under no circumstances must any work be carried out on equipment or system rated as LIVE by Council employees'.

Sherwood Lodge

The Chair advised that concerns had been raised at the Trade Union Liaison meeting in respect of the removal of the former restaurant area as a facility for staff to take their meal break from work, following management's decision to rent out the space. It was added that no formal consultation had taken place with the unions on this issue and there had been no indication of what alternative staff facilities would be provided. Although budget pressures were recognised, union representatives considered this to compromise the health and welfare of staff and further dialogue was needed. It was suggested that it may be appropriate to raise this issue through the Union/Employee Consultation Committee.

Moved by Councillor B.R. Murray-Carr, seconded by Councillor P.M. Bowmer **RESOLVED** that (1) the report and changes to policies outlined be considered,

(2) amendments to the Electricity at Work Policy, First Aid at Work Policy, Mobile Phone Safety Policy and Noise at Work Policy be noted and the policies be updated and placed on ERIC.

The Head of Housing joined the meeting.

247. HEALTH AND SAFETY OFFICER VACANCY

The Head of Human Resources and Payroll presented the report to advise the Committee that the Health and Safety Officer's post would be vacant from 1st August 2011, following the resignation of the current postholder.

A report had been submitted to Senior Management Team on 7th July to consider options for a possible joint arrangement with another authority. Mansfield and Bassetlaw had expressed an interest and meetings would take place to further discuss options later this week. It was added that the Council was seeking to put in place a more robust service without the need for additional cost.

The Head of Human Resources and Payroll would present a business case to Senior Management Team and Council once further details were available.

Interim arrangements had been put in place with North East Derbyshire District Council who would be available to provide Health and Safety and Policy advice as required. The Head of Human Resources and Payroll confirmed that enquiries should still be directed through Bolsover's Human Resources Department.

Moved by Councillor B.R. Murray-Carr, seconded by Councillor P.M. Bowmer **RESOLVED** that the report be received.

Members and Union representatives requested that their thanks be recorded to the Health and Safety Officer for the excellent service and support he had provided throughout his employment with the Council and wished him well for the future.

248. GROUP DWELLINGS - LEGIONELLA RISK

The Head of Housing presented the report to update the Committee on the work being carried out at the Council's group dwellings to address the suspected legionella risk.

The meeting was advised that the work to be carried out was more substantial than originally envisaged. A report would be presented to Council to seek suspension of Contract Standing Orders to enable the work to proceed urgently. Contracts were currently being considered by Legal Services.

In response to questions, the Head of Housing confirmed that work should commence within the next two weeks subject to approval of the contract by Legal Services.

Moved by Councillor B.R. Murray-Carr, seconded by C. Gilfillan. **RESOLVED** that the report be received and actions noted.

The Head of Housing left the meeting.

249. THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

Moved by Councillor B.R. Murray-Carr, seconded by Councillor P.M. Bowmer **RESOLVED** that under Section 100(A)(4) of the Local Government Act 1972 (as amended), the public be excluded from the meeting for the following item of business on the grounds that it may involve the likely disclosure of exempt information as defined in the stated Paragraph of Part 1 of Schedule 12A of the Act and it is not in the public interest for that to be revealed.

250. ACCIDENT AND STRESS STATISTICS - APRIL TO JUNE 2011 EXEMPT – PARAGRAPH 2

The Health and Safety Officer presented the report to advise Members of the accident and stress statistics for the period April to June 2011, with comparative figures for the previous year. The Committee was provided with updated information in respect of two further accidents.

Concerns were raised in respect of the injuries as a result of attacks by animals. It was requested that it be relayed to relevant Heads of Service that mechanisms be put in place to make it clear to customers at the time of booking a repair, that animals should be kept away from Council employees entering properties.

Moved by Councillor B.R. Murray Carr, seconded by C. Gilfillan **RESOLVED** that the report be received.

(Head of Human Resources and Payroll)

The meeting concluded at 1455 hours.

Committee: Safety Committee Agenda Item 5.

No.:

Date: 4th November 2011 Category

Subject: Sickness Absence/Occupational Status Open

Health Statistics April to June

2011

Report by: Head of Human Resources/

Payroll

Other Officers Senior HR Officer

involved: Human Resources Officer

Director Chief Executive Officer

Relevant Councillor E. Watts, Leader of

Portfolio Holder the Council

RELEVANT CORPORATE AIMS

STRATEGIC ORGANISATIONAL DEVELOPMENT – Continually improving our organisation by providing monitoring information which can be used to shape future policy decisions

TARGETS

The subject matter of this report does not contribute to any specific targets in the Corporate Plan.

VALUE FOR MONEY

As this report relates to retrospective monitoring data value for money criteria is not applicable

THE REPORT

- Sickness Absence/Occupational Health Referral Statistics April to June 2011 and 2010.
 - 1.1 The sickness absence outturn for the first quarter of 2011 (April to June) is shown below, with comparisons for the same period during 2010:

Apr-June 2011	Apr-June 2010
1.63 days per FTE	1.64 days per FTE

The target for April to June 2011 was 2 days per FTE.

A breakdown of these figures by Department and Long Term/Short Term Sickness Absence is provided at page 13 for information.

The overall sickness figure is slightly down on last year's figure and better than the target. This is largely due to a decrease of 62 working days less due to long term sickness, but with a corresponding increase in short term sickness of 41.5 working days. The breakdown of this figure into long term/short term sickness is shown below.

	Long Term	Short Term
Apr-June 2011	0.89 days per FTE	0.74 days per FTE
Apr-June 2010	0.93 days per FTE	0.70 days per FTE

The departmental breakdown of sickness absence has been referred to Directors/Heads of Service to deal with any adverse trends in their Directorates/Departments in relation to short term sickness absence.

1.3 The outcome of occupational health referrals for the first quarter of 2011, with comparisons for the same period during 20 are shown below:

	Apr-June 2011	Apr-June 2010
Rehabilitation	4	1
Resigned	0	0
Dismissal	0	0
III Health Retirement	0	0
Outstanding	2	0
TOTAL	6	12

Of the two cases which are currently unresolved, one is currently subject to a search for re-deployment and the second case is awaiting an opinion on ill health retirement. An update on these will be given at the meeting.

1.4 A breakdown of the reasons for all long term sickness absence is as follows:

Reasons for I	ong Term Sickness A	Absence
Reason for Absence	No. of Employees Citing this Reason Apr-June 2011	No. of Employees Citing this Reason Apr-June 2010
Muscular Skeletal	2	3
Stress/Depression	1	2
Other	1	3
Genito/Gynaechological	1	1
Neurological	0	1
Back/Neck	1	1
Ear/Nose/Mouth	0	1
TOTAL	6	12

1.5 Details of health surveillance events, held during the period April to June 2011, are as follows:

There was no health surveillance clinics held during this period.

There have been 3 employees undergoing counselling during this period.

ISSUES FOR CONSIDERATION

Members of the Committee are asked to note the statistical information provided and action taken to address any adverse trends.

IMPLICATIONS

Financial: None Legal: None

Human Resources: Compliance with employment legislation relating to managing

sickness absence

RECOMMENDATION

That the report be received.

ATTACHMENT: Y (1)
FILE REFERENCE: N/A
SOURCE DOCUMENT: N/A

LPI12 - APRIL TO) JUNE	2011	LONG	TERM/SHO	RT TERM S	PLIT	
DEPARTMENT	FTE	DAYS LOST	FTE DAYS	LONG TERM ABSENCE NO OF DAYS	SHORT TERM ABSENCE NO OF DAYS	LT ABSENCE PER FTE	ST ABSENCE PER FTE
CHIEF EXECS DIRECTORATE							
CHIEF EXECUTIVES AND PARTNERSHIP	5.00	4	0.80	0	4	0.00	0.80
CONTACT CENTRES	20.10	78.5	3.91	55	23.5	2.74	1.17
CUSTOMER SERVICE/PERFORMANCE	12.43	39.5	3.18	30	9.5	2.41	0.76
HUMAN RESOURCES AND PAYROLL	11.00	0	0.00	0	0	0.00	0.00
APPRENTICES	64.46	149.5	2.32	42	107.5	0.65	1.67
LEGAL/DEMOCRATIC DIRECTORATE							
DEMOCRATIC	10.10	0	0.00	0	0	0.00	0.00
LEGAL/LICENSING AND LAND CHARGES	11.19	8	0.71	0	8	0.00	0.71
RESOURCES DIRECTORATE							
FINANCE	10.42	6.5	0.62	0	6.5	0.00	0.62
PROCUREMENT	2.81	0	0.00	0	0	0.00	0.00
REVENUES	35.61	11	0.31	0	11	0.00	0.31
NEIGHBOURHOODS							
LEISURE	47.14	33	0.70	26	7	0.55	0.15
COMMUNITY	14.00	23	1.64	22	1	1.57	0.07
STREET SERVICES	95.21	157.5	1.65	100	57.5	1.05	0.60
HOUSING (REPAIRS AND MANAGEMENT)	114.29	227	1.99	138	89	1.21	0.78
DEVELOPMENT							
PLANNING/ECON DEV/HOUSING							
STRATEGY	25.40	33	1.30	23.5	9.5	0.93	0.37
REGENERATION/ENVIRONMENTAL	40.40	01	0.40	24	5 7	0.70	4.24
HEALTH	43.42	91	2.10	34	57	0.78	1.31
DEVELOPMENT ADMIN	5.76		0.17	0	202.00	0.00	0.17
GRAND TOTAL	528.34	862.50	1.63	470.5	392.00	0.89	0.74

Committee: Safety Committee Agenda Item 6.

No.:

Date: 4th November 2011 Category

Subject: Sickness Absence/Occupational Status Open

Health Statistics July to

September 2011

Report by: Head of Human Resources/

Payroll

Other Officers Senior HR Officer

involved: Human Resources Officer

Director Chief Executive Officer

Relevant Councillor E. Watts, Leader of

Portfolio Holder the Council

RELEVANT CORPORATE AIMS

STRATEGIC ORGANISATIONAL DEVELOPMENT – Continually improving our organisation by providing monitoring information which can be used to shape future policy decisions

TARGETS

The subject matter of this report does not contribute to any specific targets in the Corporate Plan.

VALUE FOR MONEY

As this report relates to retrospective monitoring data value for money criteria is not applicable

THE REPORT

- 1. Sickness Absence/Occupational Health Referral Statistics July to September 2011 and 2010.
 - 1.1 The sickness absence outturn for the first quarter of 2011 (July to September) is shown below, with comparisons for the same period during 2010:

Jul-Sept 2011	Jul-Sept 2010
2.39 days per FTE	1.97 days per FTE

The target for July to September 2011 was 2 days per FTE. Giving an outturn for the first six months of 4.02 days per FTE against a target of 4 days per FTE.

A breakdown of these figures by Department and Long Term/Short Term Sickness Absence is provided at page 17 for information.

The overall sickness figure is higher than last year's figure and worse than the target. This is largely due to an increase of 114 working days due to long term sickness, and an increase in short term sickness of 63 working days. The vast majority of this increase results from the following sections where there have been increases in both long term and short term sickness absence:

- Apprentices
- Street Services

Concerns have been raised with both sections, with the purpose of ensuring the managing sickness absence procedure is being consistently applied. A breakdown of the total sickness figures into long term/short term sickness is shown below.

	Long Term	Short Term
Jul- Sept 2011	1.53 days per FTE	0.86 days per FTE
Jul-Sept 2010	1.26 days per FTE	0.71 days per FTE

The departmental breakdown of sickness absence has been referred to Directors/Heads of Service to deal with any adverse trends in their Directorates/Departments in relation to short term sickness absence.

1.3 The outcome of occupational health referrals for the second quarter of 2011, with comparisons for the same period during 2010 are shown below:

	Jul-Sept 2011	July-Sept 2010
Rehabilitation	5	13
Normal Age Retirement	0	1
Outstanding	4	1
TOTAL	9	15

Of the four cases which are currently outstanding a verbal update will be given at the meeting, as to outcomes.

1.4 A breakdown of the reasons for all long term sickness absence is as follows:

Reasons for Lor	ng Term Sickness	Absence
Reason for Absence	No. of Employees Citing this Reason July-Sept 2011	No. of Employees Citing this Reason July-Sept 2010
Muscular Skeletal	6	7
Genito/Gynaechological	2	1
Stomach/Digestion	1	0
Back/Neck	0	2
Infections	0	2
Heart/Blood Pressure	0	1
Other	0	1
Pregnancy	0	1
TOTAL	9	15

1.5 Details of health surveillance events, held during the period July to September 2011, are as follows:

There were four health surveillance clinics held during this period covering HAVS, audiometry and driver reviews for 43 employees.

There have been 2 employees undergoing counselling during this period.

ISSUES FOR CONSIDERATION

Members of the Committee are asked to note the statistical information provided and action taken to address any adverse trends.

IMPLICATIONS

Financial: None Legal: None

Human Resources: Compliance with employment legislation relating to

managing sickness absence

RECOMMENDATION

The report be received.

ATTACHMENT: Y (1)
FILE REFERENCE: N/A
SOURCE DOCUMENT: N/A

LPI12 - JULY TO SI	EPTEMBE	ER 2011	LONG	TERM/SH	ORT TERM	SPLIT	
DEPARTMENT	AVERAGE FTE 6 MONTHS	DAYS LOST	FTE DAYS	LONG TERM ABSENCE NO OF DAYS	SHORT TERM ABSENCE NO OF DAYS	LT ABSENCE PER FTE	ST ABSENCE PER FTE
CHIEF EXECS DIRECTORATE							
CHIEF EXECUTIVES AND PARTNERSHIP	5.00	0	0.000	0	0	0.00	0.00
CONTACT CENTRES	21.12	114	5.398	97.5	16.5	4.62	0.78
CUSTOMER SERVICE/PERFORMANCE	11.77	22	1.869	21	1	1.78	0.08
HUMAN RESOURCES AND PAYROLL	11.00	3	0.273	0	3	0.00	0.27
APPRENTICES	60.46	235.5	3.895	145	90.5	2.40	1.50
LEGAL/DEMOCRATIC DIRECTORATE							
DEMOCRATIC	10.10	1	0.099	0	1	0.00	0.10
LEGAL/LICENSING AND LAND CHARGES	11.19	10	0.894	0	10	0.00	0.89
RESOURCES DIRECTORATE							
FINANCE	10.42	3	0.288	0	3	0.00	0.29
PROCUREMENT	2.81	0	0.000	0	0	0.00	0.00
REVENUES	36.56	29	0.793	9	20	0.25	0.55
NEIGHBOURHOODS							
LEISURE	47.64	55.5	1.165	43	12.5	0.90	0.26
COMMUNITY	14.00	1	0.071	0	1	0.00	0.07
STREET SERVICES	94.48	324.5	3.435	179	145.5	1.89	1.54
HOUSING (REPAIRS AND							
MANAGEMENT)	112.79	281.5	2.496	189.5	92	1.68	0.82
DEVELOPMENT							
PLANNING/ECON DEV/HOUSING STRATEGY	25.40	56	2.205	50	6	1.97	0.24
REGENERATION/ENVIRONMENTAL	20.40	30	2.200	30	0	1.31	0.24
HEALTH	42.83	98	2.288	66	32	1.54	0.75
DEVELOPMENT ADMIN	5.76	19	3.299	0	19	0.00	3.30
GRAND TOTAL	523.33	1253.00	2.39	800	453.00	1.53	0.87

Committee: Safety Committee Agenda Item 7.

No.:

Date: 4th November 2011 Category

Subject: General Health and Safety Status Open

Report

Report by: Head of Human Resources and

Payroll

Other Officers Head of Housing

involved: Street Services Manager

Emergency and Responsive

Manager HR Officer

Assistant Facilities Manager

Director Joint Chief Executive Officer

Relevant Councillor E. Watts, Leader of

Portfolio Holder the Council

RELEVANT CORPORATE AIMS

STRATEGIC ORGANISATIONAL DEVELOPMENT – Continually improving our organisation, by ensuring we comply with legislation and best practice.

TARGETS

The subject matter does not relate to any targets specified in the Corporate Plan.

VALUE FOR MONEY

Helping ensure that the Council discharges its legal responsibilities and does not incur legal costs, fines or civil penalties.

THE REPORT

Health & Safety Service Review

Following the Health and Safety Officer leaving the Council on 31st July 2011, as previously reported, a service review is underway with Bassetlaw and Mansfield District Council to determine if a shared service would improve the resilience of the health and safety function.

An outline business case was produced in August 2011, and the Head of HR and Payroll received the agreement of Senior Management Team and Cabinet to proceed to a detailed business case. A copy of the outline business case report is attached.

An initial project planning meeting took place on 7 September 2011, when a set of data to be gathered and analysed was identified. This being necessary in order to establish any significant differences in terms of staffing levels and performance levels. It was agreed at this initial meeting that a full business case for approval in each Council would be concluded by no later than Christmas.

A further project group meeting took place on 7 October to take this work forward, and the Chair of Safety Committee has been invited to participate as part of the project group. Mansfield District Council is providing project management expertise from their Business Transformation Unit. Following this meeting a first draft of a detailed business case will be prepared by the end of October.

Animal Control

It was raised at the last Safety Committee that action needed to be taken to remind tenants in Council properties to keep their dogs under control when our employees are visiting the premises. This issue was raised with the Head of Customer Service and Performance and the Head of Housing. The following action has been taken.

The following script has been added to the Omfax system and Contact Centre employees have been asked to ensure this message is relayed.

Please read the following information to the customer:

As a condition of your Tenancy Agreement you <u>must</u> keep all animals under control and provide a safe working environment for Council Employees at all times.

Failure to comply with the above may result in further action being taken against you.

The employee protection register is used to update CRM, which is then transferred to any worksheets for other departments to notify them to check the employee protection register and this includes dangerous/vicious animals.

Health and Safety Audit

A health and safety audit was completed by internal audit in June 2011. The overall rating was 'Satisfactory'.

Three points were identified for action:

1. **Benchmarking** – The Health and Safety Officer is asked to find matching partners for comparing health and safety performance. These will need to be comparable in size and function and have the same profile of retained services (Housing, Leisure, Waste, Grounds Maintenance).

Update: This process is currently on hold pending the outcome of the health and safety service review with Mansfield and Bassetlaw, but as an interim step benchmarking data using information gathered through the Safety Network at East Midlands Councils has been added to the Safety Committee statistic report.

2. Workplace inspection – The Health and Safety Officer was asked to remind all Heads of Service that they must comply with the inspection timetable outlined in the Workplace inspections Policy. Whilst inspections are being undertaken they are often not being undertaken at the frequency outlined in the policy. All areas are expected to use the format included in the policy, unless they have agreed a different format with Human Resources.

Update: A reminder was issued and the status of workplace inspections due in September is as follows:

Workplace inspections have been carried out at Sherwood Lodge and Riverside Depot as per the schedule. No major issues or issues which could not be easily resolved were recorded.

Monitoring procedures are in place for the quarter October to December 2011, the outcome of which will be brought to the next Safety Committee.

3. Policies – It was noted that certain health and safety policies had not been reviewed within the timescales outlined in the policies themselves. As a matter of urgency those policies with the most significant updating required have been either subsequently updated or are 'in the system'. Following consideration by the Head of Human Resources and Payroll, the frequency of the review of policies will move from every two years to every three years in line with all other HR policies. Amendments will be made if there are any legislative or organisational structure changes during the three year period. Human Resources will be amending all the health and safety policies to reflect this during August/September.

Update: The HR Officer has now updated all Policies on ERIC to reflect the three year review cycle agreed at the last meeting.

Training

First aid refresher training, 1 course for 5 employees Lone Worker (Personal Safety) training, 3 courses for 76 employees Manual Handling training, 5 courses for 43 delegates Working at Heights training, 1 course for 10 delegates Sweeper Driver Training, 1 course for 3 delegates

Improvement Notice Action Plan (Vibration)

Work activity continues to be surveyed for all operatives as before – No further incidents of exposure over the legal maximum (5ms²/400 points) have been recorded.

The Street Services Manager reports that no further progress has been made on the electronic monitoring equipment, mainly due to the current workload not allowing time to pursue development with suppliers. There is no product currently on the market which fully meets our requirements at a reasonable cost. The electronic monitoring is not a legal requirement, but is seen as a more robust preventative system than our current manual one.

HSE Inspection of Waste Services

The Health & Safety Executive (HSE) undertook an inspection of Waste Services, the purpose of the visit being to review waste services procurement of management in relation to the recycling element of the service which is undertaken by our contractors. A copy of the letter received from the HSE is attached.

The Street Services Manager has discussed this separately with both North East Derbyshire District Council and HW Martins. In order to progress the areas for improvement this has been added as an agenda item for our annual contract review meeting on 12 October 2011, at this meeting the Street Services Manager will hopefully agree a joint improvement plan / way forward.

The Street Services Manager has also been asked by the Joint Director of Neighbourhoods to draft a common pre and post tender health and safety protocol for contract monitoring. This will be based on the HSE inspection template, and will apply to such contracts as HW Martins, Shaw Trust, and Evendine.

A verbal update will be provided at the meeting.

Policy Reviews

The following policy has been reviewed:

Legionella Policy

The main change being a split of the Duty Holder role, previously carried out solely by the Head of Regeneration. This change will mean that once the Policy is approved, the managerial responsibility for the control of legionella bacteria will be split into two parts:

- The Head of Housing will be the Duty Holder with responsibility for Council owned 'domestic' housing stock including Group Dwellings (ie Council Houses)
- The Head of Regeneration will have responsibility for everything else, usually referred to as the 'commercial' property portfolio.

Each Duty Holder will appoint a Deputy Duty Holder to act in their absence.

Apart from the above changes the Legionella Policy has only had minor changes relating to personnel.

Training for the Head of Housing has already been identified to enable him to carry out this role effectively. As there are now two Duty Holders it will be possible for these two officers to deputise for each other.

The following is a new Policy:

Drugs and Alcohol Policy

The Council has previously not produced a specific policy relating to the safety issues which drugs and alcohol abuse raise, but has relied solely on a provision within the Employee Code of Conduct. Reference is made to support for those with drug and alcohol problems within the Managing Sickness Absence Procedure and in producing this policy we have ensured that the two policies 'dovetail' in respect of provision of support/potential disciplinary action.

The aim of the Policy is to contribute to a safe, healthy and productive work environment by:

- Preventing drugs and alcohol problems through awareness raising;
- Identifying problems at the earliest stage;
- Offering support to those who have a problem.

Once the Policy is approved it is intended to offer again training to all managers and employees in order to raise awareness of the issues. This training is provided free of charge through the Derbyshire Drugs and Alcohol Advisory Service.

The policy was sent out for consultation over the summer period.

Legionella - Valley View, Shirebrook, Parkfields, Woburn House, Jubilee Court.

The following update has been provided by the Head of Housing in respect of Valley View:

To date work has been carried out to 16 flats at Valley View. This includes work to the warden's flat and the flat that is used as the warden's office. The three tanks and cylinders that serve communal facilities have also been altered.

In total this leaves 14 flats still to complete and on the basis that each flat is being completed in approximately 6-7 days including asbestos removal the entire works should be completed by the start of December. It's a little difficult to give a specific date as we are having to work with the warden and the tenants in the flats and don't always know which flats we can gain access to until the Thursday/Friday and there have also been some tenants in hospital so things have had to be arranged with their families to get the work carried out.

The experience at Valley View will be used to draw up a specification and the works will go out to competitive tender. The next scheme will be Woburn House, but the specification will be drawn up in such a way that if each scheme is successful we will be able to move onto the next without the need to retender.

Sherwood Lodge

New tenants Bolsover Police and Whylde about food are now in residence. A fire risk assessment with the café has been undertaken, and actions completed. Bolsover Police supplied their fire risk assessment mid October. Any issues arising from this will be reported at the meeting.

IMPLICATIONS

Financial: No direct financial implications or additional commitments

Legal: None

Human Resources: No direct implications

RECOMMENDATIONS that

1. Various updates within the report are noted.

- 2. Changes to Legionella Policy outlined are considered.
- 3. The new Drugs and Alcohol Policy be considered.
- 4. The Legionella Policy and the Drugs and Alcohol Policy be approved by Safety Committee and the policies be updated and placed on ERIC.

ATTACHMENT: Yes (3) – Health & Safety Review Outline Business Case

HSE Letter Dated 14 September 2011

Drugs and Alcohol Draft Policy







Joint Health & Safety Service Outline Business Case

Date: 11 August 2011

Author:	Jim Moran, Principal Health & Safety Officer (Bassetlaw DC)
	Linda Keeling, Head of Human Resources/Payroll (Bolsover DC)
	Chris Rowlston, Environmental Health Manager (Mansfield DC)
Client:	Bassetlaw District Council
	Bolsover District Council
	Mansfield District Council
Release	Draft V1

1. Purpose of the Report

To set out an outline business case to enable elected members and senior management to determine whether there is the potential for a shared Health and Safety service. Where it is agreed that the potential exists for a shared Health and Safety service, the recommendation will be to proceed with the production of a full business case for presentation to elected members and senior management in each Council.

This document comprises:-

- An overview relating to the current situation
- An outline of the project
- Benefits
- Recommendation

2. Overview of the Current Situation

The current delivery arrangements for the Health and Safety function at each of the three Councils are set out below:

Bassetlaw District Council

- 1 Principal Safety Officer and 1 Safety Officer to cover 506 employees.
- Housing and Leisure Centres are contracted to A1 Housing Bassetlaw and BPL respectively. Each has their own Safety Advisers.
- Bassetlaw do not operate a Highways Service.
- The Safety Officers provide the Council's Emergency Planning function. Costs of which are split 60 / 40 in favour of safety.
- The Safety Officers are based within the Environment & Leisure Service.

Bolsover District Council

- 1 Principal Health and Safety Officer (position vacant) to cover 600 employees
- All functions are retained in house at Bolsover, including Housing and Leisure
- Bolsover do not operate a Highways Service
- The Health and Safety function does not provide the Council's Emergency Planning function.
- The Health & Safety Officer post is based within the Human Resources and Payroll service.

Mansfield District Council

- 1 Health and Safety Team Leader (22.5 hours) (position vacant*), 2 Health and Safety Advisors, qualified to NEBOSH Diploma level and 1 Fire Risk Officer, appointed as the competent person for the purposes of the Regulatory Reform (Fire Safety) Order 2005 to cover 1,000 employees
- All functions are retained in house at Mansfield including Housing and Leisure.

- Mansfield currently operate a Highways Service, but this is due to transfer to Nottinghamshire County Council on April 1st 2012
- The staff within this team also delivers the Council's Civil Contingency and Fire Safety responsibilities. Costs of which are split 70 / 30 in favour of safety.
- The Health and Safety function is managed by the Environmental Health Manager.
- * A recruitment exercise has been completed for this team leader post but a suitable person was not identified through this process. The post will not be advertised again until a review of options has been completed. This review would include the range of delivery options based upon the shared service model.

3. Project Outline

3.1 Objectives

The aims and objectives of a shared service would be:

- To deliver a professional health and safety service to all three Councils, with the required level of professional health and safety advice at both a management and operational level.
- To achieve improved outcomes for each of the three Councils, including the
 efficient use of resources at a strategic level and the pooling and sharing of
 individual expertise within each of the three Councils.
- Any change in service delivery must produce either cashable savings delivered
 within an agreed timetable or defined service enhancements that service users in
 each Local Authority can understand and appreciate. Initial discussion indicates
 that a more resilient service can be delivered with savings on training and
 procurement.
- The collaboration will reflect local circumstances and priorities; accountability will be enhanced and not diminished through the process.

3.2 Project Scope

- The focus will be on the Health and Safety function. The inclusion of Emergency/Civil Contingency Planning will be outside the scope of this review as such an arrangement would be significantly restricted due to the differing Emergency Planning structures and relationships with the Counties of Derbyshire and Nottinghamshire.
- Initial discussions have identified the following areas which are worthy of greater review:
 - Provision of health and safety advice/monitoring
 - · Accident/incident reporting,
 - Workplace Inspections
 - Audits

- Training
- Procurement
- Policy/procedural documentation alignment where this could lead to efficiencies in operation
- The collaboration between the three Local Authorities will take a pragmatic approach examining which aspects of a particular service are best delivered at each level.

4. Benefits

Initial discussions have taken place to determine whether it is believed there is scope for undertaking a full business case in respect of a shared service for the provision of health and safety. It is believed that the following benefits would be achieved by working in partnership for the provision of Health and Safety services to the three Councils.

- Efficiencies in the provision of Strategic Health and Safety Management to all three Councils.
- More resilient structure providing competent staff at all times.
- The standardisation of management practices and acceptance of safety responsibilities across all three Councils.
- Greater knowledge base and abilities that will enable more training to be delivered in house and achieve cost savings.
- Development of shared learning and bespoke IT packages that will facilitate embedding the health and safety culture at each Local Authority.
- Improved career and succession planning.
- Consistent approach to the interpretation of Health and Safety legislation to provide assurance to each Local Authority senior management team.

5. Recommendation

To proceed to production of a full business case to determine the potential for a shared health and safety service.



Bolsover District Council Riverside Depot Mansfield Road Doe Lea Chesterfield S44 5NY

Reference:

4264819/SDP/01



Field Operations Directorate

Stuart Parry

Midlands Division

City Gate West Toll House Hill Nottingham NG1 5AT

Tel: 0115 971 2800 Fax: 0115 971 2802 stuart.parry@hse.gsi.gov.uk

http://www.hse.gov.uk/

HM Principal Inspector Sarah Jardine

For the attention of Mr Stuart Tomlinson

Date:

14th September 2011

Dear Sir

HEALTH & SAFETY AT WORK ETC ACT 1974

I refer to my visit to your premises on 12th September 2011 when I was accompanied by my colleague Mr Edward Walker, HM Inspector of Health and Safety. You will recall that the purpose of our visit was to review and assess your policies and procedures regarding waste services procurement and management and I am writing to confirm matters that were discussed at that time. These are not necessarily all the matters identified as requiring attention during the inspection, but refer to the most significant topics that were discussed during our visit. It remains your responsibility to manage your contractors and ensure they are identifying workplace hazards and maintaining effective safeguards to minimise those risks when working on your behalf.

The majority of our visit was spent discussing your arrangements with H W Martin Limited, who undertake your kerbside collection of recyclable materials. You explained that this service is provided as part of a five year contract which commenced last year and to which a neighbouring authority, North East Derbyshire District Council, are also party to. As your collection of residual material is still in house, we did not cover your management of health and safety in this area in any great detail.

From the information you provided I am satisfied that occupational health and safety was an integral part of your procurement and selection process, and that the topic was given due weighting and consideration in your overall deliberations.

However while you maintain a close working relationship with H W Martin Limited to maintain effective service delivery and you have observed some good practice during announced visits to their two static locations, there is no formal framework for the management, monitoring and review of their health and safety performance and you were unable to confirm whether your contractor was adhering to some of its undertakings given when the contract was awarded. Therefore you should consider what arrangements you can put into place to ensure that your contractor is managing risks safely.

Section 1985 Section 1995

To assist with this I wish to refer you back to the Inspection Proforma used by ourselves during the visit and which is available from the hyperlink included in the e-mail sent to Mr Lowery. Together with the rest of its parent document, SIM 03/2010/04, it should help you identify the types of health and safety topics that you should consider when assessing your contractors performance. Examples include the content of their induction training, their levels of supervision on route work, condition of vehicles, employee compliance with instructions, types of clothing issued and worn, training regarding manual handling and reversing vehicles and so on.

There are a number of different ways you can monitor and influence performance in these areas, most notably covering them as part of your existing agenda item regarding health and safety in your regular meetings with H W Martin, which have been either weekly or monthly during the contract, due to service variations and other considerations. Alternatively you could establish a contract safety review committee with specific terms of reference.

Irrespective of the mechanisms used, you should request evidence of planning, competency and performance, and not just in areas such as those given above, but with regard to key indicators such as accident/incident/near miss occurrences. You may also wish to view minutes of their health and safety committee meetings, or even attend them. Finally, you are aware of how useful periodic observation of collection and depot work can be in forming judgements on health and safety and you should plan what role this will play in your overall approach.

As explained during the inspection, my colleague and I also will wish to observe some site work, of both kerbside and waste transfer/depot activity, and I will contact Mr Lowery in approximately three months to arrange this. In the interim, please consider how you will improve your monitoring arrangements with regard to H W Martin Limited and write to me by 9th January 2012 summarising the actions you will undertake. Although your correspondence does not necessarily have to take the form of a formal action plan, it should detail timescales, frequencies and roles and responsibilities.

As required by section 28(8) of the Health and Safety at Work etc. Act 1974, I have included a copy of this letter for the attention of your employees, via Mr Sandbrooks. Although the selection and management of contractors for waste collection services does not have a direct impact on his members employed by the Authority, I trust the topic is nevertheless of interest.

In the interim, if you require any further information or clarification of the issues, then please contact me at the above address.

Yours faithfully

Stuart Parry

HM Inspector of Health and Safety

cc Mr Adrian Lowery
Mr Steve Sandbrooks

tull

BOLSOVER DISTRICT COUNCIL Drugs and Alcohol Policy

Draft August 2011



This Policy addresses the following Corporate Aims:





ACCESS FOR ALL

If you need help understanding this document or require a larger print or translation, please contact us on the telephone number at the bottom of the page.

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0

اگر آپ کو یہ دستاویز سمجھنے میں مدد کی ضرورت ہو یا یہ بڑے حروف یا ترجمہ کی شکل میں درکار ہو تو برائے مہربانی اس صفحے کے آخر میں دیے گئے نمبر پر ہم سے رابطہ کریں۔

1246 Department:

Minicom: 01246 242450 Fax: 01246 242423

Website: www.bolsover.gov.uk

Revised February 2011

CONTROL SHEET

Details of Document	Comments / Confirmation
Title	Drugs and Alcohol Policy
Title	2.age and / acciter a citey
Document type – i.e. draft or final version	Draft
Location of Policy	Human Resources
Author of Policy	Health and Safety Officer
Member route for Approval & Cabinet Member concerned	Safety Committee Leader
Date Risk Assessment completed	July 2010
Date Equality Impact Assessment approved	June 2011
	NUI
Partnership Involvement (if applicable)	Nil
	N/A
Date added to the Forward Plan	N/A
Policy Approved by	Safety Committee
7 11	
Date Approved	
Policy Review Date	January 2014
Date forwarded to CSPD	
(to include on Intranet and Internet if applicable to the public)	

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Appendix A Symptoms

1. INTRODUCTION AND SCOPE

Bolsover District Council seeks to conduct its activities in a way which will achieve the highest possible standard of health and safety for its employees, (including volunteers and elected members), visitors, contractors, agency workers and members of the public.

This policy aims to contribute to a safe, healthy and productive work environment by:

- preventing drugs and alcohol problems through awareness raising;
- identifying problems at the earliest stage;
- offering support to those who have a problem.

This applies equally to all employees, volunteers, agency workers, elected members, trainees, apprentices, including all levels of management.

All employees are encouraged to notify the Council if they take prescription drugs and over the counter preparations which could affect performance and create a safety risk.

Neither 'in service testing' nor 'random testing' are part of this policy.

2. LEGAL REQUIREMENTS and CORPORATE AIMS

2.1 Legislation

The Health and Safety at Work etc. Act 1974
The Management of Health and safety at work Regulations 1999

2.2 Corporate Aims

Strategic Organisational Development – continually improving our organisation by providing a safe, healthy and productive work environment: preventing drugs and alcohol problems at work through awareness raising, identifying problems at the earliest stage and offering support to those who have a problem.

3 POLICY STATEMENT

The Council will provide a safe and healthy working environment. It recognises that this can be put at risk by those who misuse alcohol or drugs to such an extent that it may affect their own health, performance, conduct and relationships at work.

The policy will promote the health and well-being of employees, seek to minimise problems at work arising from the effects of alcohol or drugs and will provide information on the action that will arise from drug and alcohol use in the context of their employment with the Council.

The Council's policy is to deal reasonably and sympathetically with employees who have drug and alcohol related issues and problems.

4. RESPONSIBILITIES

All employees have a responsibility to take care of their own and others health and safety whilst at work, and to be mindful of the effect of drugs (whether prescription drugs or not) and alcohol on their ability to carry out their work safely.

This of course is particularly important for operators of machinery and for vehicle drivers.

4.1 The Chief Executive Officer

The Chief Executive Officer is responsible for ensuring that the policy is communicated and implemented across the Council.

4.2 Directors

Directors are accountable to the Chief Executive Officer for the operations and activities carried out within their areas of responsibility. They will, ensure that employees etc. in their area are aware of, accept and carry out their responsibilities under this policy.

4.3 Heads of Service

Heads of Service are accountable to their Director for ensuring that the Drugs and Alcohol Policy is complied with in their Service Area. Additionally they will ensure:

- Implementation of and familiarity with the policy.
- Promoting and maintaining safe systems of work.
- Ensuring staff understand the policy and their responsibilities under it.
- Employees are encouraged to seek appropriate advice, assistance and treatment.

4.4 Managers and Team Leaders

Managers and Team Leaders are responsible to their Head of Service for ensuring effective drug and alcohol control measures are in place. Additionally they will:

 Be alert to possible abuse problems, monitoring changes in work performance, attendance, sickness and accident patterns and intervene early where there are signs of problems.

- Take a non-judgemental approach when dealing with employees.
- Refer employees for assistance when appropriate and support employees who are receiving treatment, counselling etc.

4.5 Head of Human Resources and Payroll

The Head of Human Resources and Payroll will provide appropriate support to managers and employees:

- Assist managers in implementing the policy
- Monitor, review and revise the policy
- Advise on the application and appropriateness of the disciplinary and capability procedures
- Consult with trade unions on policy.

4.6 The Health and Safety Officer

The Health and Safety Officer will assist managers and employees in carrying out their roles under the Policy by:-

- Providing additional information and professional support.
- Providing advice on instruction, information and training.
- Monitoring the implementation of the policy within Service Areas.
- Reviewing the policy every two years.

5. SAFE SYSTEM OF WORK

The effects of alcohol or drugs at work can create serious health and safety risks, particularly when driving or working with machinery. Therefore, the following rules must be adhered to by all those covered under the policy:

- Do not attend work under the influence of alcohol or drugs
- Check with you doctor or pharmacist about the side-effects of prescribed medications
- Never drive or operate machinery if you are affected by any alcohol or drugs
- Offer support to colleagues who you suspect of suffering from alcohol or drug abuse: do not "protect" them by keeping silent.
- Ask for assistance if you feel that matters are beyond your own control.

The use of alcohol is not appropriate in the workplace and some drug use/abuse may be a criminal offence as well as a serious risk to health and safety.

5.1 Information and training

The Council will provide sufficient information, instruction and training, to ensure that all employees can:

- understand the Council's policy and the risks associated with the effects of alcohol or drugs at work
- understand the Council's procedures that will be adopted where there
 is found to be a deterioration in work performance from these effects
- understand the legal consequences of their actions.

6 IDENTIFYING THOSE WITH DRUG AND ALCOHOL PROBLEMS

6.1 Identifying the problem.

Identifying alcohol, drug or other substance misuse is often extremely difficult, and in some cases there are no obvious signs and symptoms until the problem becomes severe.

No single characteristic exists to identify those suffering from problems of this nature. A combination of factors over a period of time may indicate the presence of alcohol, drug or other substance related problem. See Appendix 1 – 'Signs of Substance Misuse' for more information.

Early recognition and treatment, however, enhances the prospect of rehabilitation as well as reducing the personal suffering of those concerned and their families.

6.2 Identification by the Individual Concerned

Individuals who have an alcohol or drug related problem, or who suspect that they may have, may choose to seek help on a completely voluntary basis. They may wish to approach their manager, Human Resources, or a specialist agency. Whichever source of help is chosen, the matter will be dealt with in a confidential and sympathetic manner.

When an individual is prescribed drugs which have possible adverse side effects and they are involved in work of a hazardous nature, they must notify their line manager immediately so that any adaptations required can be made.

Non-prescription medication may also have adverse side effects, such as drowsiness. Individuals should ensure, when taking such medication, that they are aware of any side effects and that they discuss the matter with their line manager so that any adaptations required can be made.

6.3 Identification by a Colleague

It may be that a colleague identifies a change in an individual's pattern of behaviour or performance. In this case it is their responsibility to draw the matter to the attention of the individual's manager. Colleagues should not, even for the best of motives, 'cover up' for a fellow member of staff whose work or behaviour is suffering as a result of an alcohol or drug related problem.

6.4 Identification by the Manager

Managers have an important role to play in identifying problems at work. Deterioration in work performance and/or changes in patterns of behaviour may be noticed by a manager with or without any other obvious signs of alcohol or drug misuse. That individual may be asked to discuss the matter with their line manager in confidence. In these circumstances Human Resources will provide advice and assistance for managers if required.

6.5 Immediate danger or risk

If an employee at work for the Council is observed to be in an unfit condition and not capable of performing work in a safe and/or productive manner, which may be related to an alcohol or drug problem, the manager will intervene immediately and directly to remove the employee from the situation.

This may include:

- removal of the employee from operational duties:
- management meeting with the employee to discuss concerns:
- employee referral to Occupational Health for an assessment and/or screening, in consultation with Human Resources.

7 SUPPORT FOR EMPLOYEES AND OCCUPATIONAL HEALTH INTERVENTION

7.1 Guidelines for Managers Supporting Council Employees

The Council will provide:

- The opportunity for referral through the Occupational Health Provider to appropriate treatment agencies in conjunction with the individual's own GP and with the individual's consent.
- Appropriate time off work to attend such treatment as recommended. Payment will be in accordance with the council's Leave Guidelines
- Opportunity for discussion with the employee, where work performance is affected.
- Recognition of any periods of treatment as periods of sickness absence, as with any other form of ill health.
- Appropriate temporary modification to duties in consultation with Occupational Health.
- Other appropriate support that may be recommended by Occupational Health.
- Maintain a level of confidentiality determined between Occupational Health and the individual, except where there may be a risk of selfharm or harm to others.

The aim will be to provide support with a view to achieving a full recovery, and a return to work to undertake the normal range of duties.

However the Council reserves the right to implement its disciplinarycapability and or disciplinary procedure or Managing Sickness Absence Procedures where appropriate under those procedures or where the Employee Code of Conduct has been breached.

7.2 Referral to Occupational Health Service

Where a manager has become aware of deterioration in an individual's work or behaviour they should discuss this with the individual and consider referral to Occupational Health.

When the individual is seen by Occupational Health, an assessment will be made as to the extent of the problem and the need for any immediate work adjustments or restrictions. These will be advised to the line management – via Human Resources confirmation of the presence or absence of a drug or alcohol problem will be made with the individual's written consent.

Treatment support will be offered by Occupational Health, in liaison with the individual's GP.

7.3 Programmes of Treatment

Where an individual is attending a treatment or rehabilitation programme for a drug and alcohol problem, Occupational Health will advise as appropriate the need for any work adjustments to enable an individual to remain at work. This may involve specific restrictions if in high risk or safety critical roles, including driving.

Where an individual refuses help or denies the existence of a problem with alcohol, drugs or other substances which affects their conduct at work or, work performance, the council's Disciplinary Procedures will be implemented. Where this reflects their attendance at work, the Managing Sickness Absence Procedure will be implemented.

7.4 Confidentiality

Medical confidentiality will be maintained for employees seeking help, advice and treatment to effect a recovery. Occupational Health will give advice on work capability and the need for work restrictions. Confidential information will not be disclosed without the written consent of the employee.

8 DISCIPLINARY and CAPABILITY PROCEDURES

Application of the Council's Capability Procedure may be a constructive way of emphasising the gravity of the problem, where it affects work performance or workplace safety, whilst giving the individual opportunities for improvement within timescales acceptable to management.

Appendix A

Symptoms

Increased absenteeism, injuries, industrial damage and theft of property are all claimed to be symptomatic of endemic drug use.

Warning signs of drug use

- Unusual aggression or irritability
- Loss of appetite
- Loss of interest in sport, ambition, friends or hobbies
- Sudden emotional changes
- Absenteeism, lateness, missing from workplace
- Drowsiness or sleepiness
- Tendency to sniff as if with hay fever or cold
- Dilation of pupils or erratic movements when following objects
- Problems with balance
- Furtive behaviour and telling lies
- Thefts from workplace and employees
- Unusual smells around the workplace or employee
- Unexplained damage to property and belongings
- Unusual stains or marks on the body (including mouth or nose), on work clothes, or around the work area
- Leftovers from drug use, particularly in areas that afford some privacy e.g. toilets

SAFETY COMMITTEE AGENDA

Committee Room One

4th November 2011 at 1000 hours

Item No.	4" November 2011 at 1000 hours		
	PART 1 – OPEN ITEMS		
	PART I - OPEN ITEMS		
1.	To receive apologies for absence, if any.		
2.	To note any urgent items of business which the Chairman has consented to being considered under the provisions of Section 100(B) 4 (b) of the Local Government Act 1972.		
3.	Members should declare the existence and nature of any personal or prejudicial interests in respect of:-		
	a) any business on the agendab) any urgent additional items to be consideredc) any matters arising out of those items		
	and if appropriate, withdraw from the meeting at the relevant time.		
4.	To approve the minutes of a meeting held on 25 th July 2011.	3 to 9	
5.	Sickness Absence/Occupational Health Statistics - April to June 2011 Recommendation on Page 12	10 to 13	
6.	Sickness Absence/Occupational Health Statistics - July to September 2011 Recommendation on Page 16	14 to 17	
7.	General Health and Safety Report Recommendation on Page 23	18 to 40	
	PART 2 – EXEMPT ITEMS The Local Government (Access to Information) Act 1985, Local Government Act 1972, Part 1, Schedule 12a		
	Paragraph 2		
8.	Accident and Stress Statistics July to September 2011 Recommendation on Page 43	41 to 47	