
CAIRNGORMS NATIONAL PARK AUTHORITY

FOR INFORMATION

Title: UPDATE ON HEALTH AND SAFETY ACTIVITY

**Prepared by: KATE CHRISTIE, HEAD OF ORGANISATIONAL DEVELOPMENT
HELEN JENKINS, GOVERNANCE AND CORPORATE PERFORMANCE MANAGER**

Purpose

To present an update of progress made by officers on recommendations made in the Regulatory Compliance internal audit report of March 2014, focusing on H&S activity.

Recommendation

The Committee is requested to note the progress made to date on H&S activity, as summarised in the paper.

Background

1. The internal audit of Regulatory Compliance in January 2014 made several recommendations on H&S activities. These were:
 - a) Arrangements should be made for H&S Audits to be carried out regularly, and the results of the audit should be addressed within 12 months.
 - b) Management should implement a formal process for employees to confirm that they have read and understood the H&S policy.
 - c) Management should review the process to identify and action new case law to ensure effectiveness and efficiency.
 - d) Policies and Procedures should be subject to a formal annual review to ensure compliance with current legislation.

2. Through focusing on these recommendations, the Authority has considered and addressed a number of additional H&S matters and is moving towards a more robust position generally. We have detailed below the H&S activity over the last 12 months, under the following key areas:
 - a) Audits and external risk assessments.
 - b) Policy.
 - c) Training.
 - d) Internal risk assessment.

Audits and External Risk Assessments

3. The LLTNPA H&S Adviser conducted a full and detailed H&S audit of both the Ballater and Grantown on Spey offices in June 2014, following her return from maternity leave. The audit resulted in a number of recommendations. There was a follow up progress meeting in December 2014, to report on activities carried out to date. Many recommendations had been met by that progress meeting, whilst others were still in hand. We are currently on track to deliver the majority of remedial actions identified by June 2015.
4. The H&S audit identified the need for several externally conducted risk assessments and activities. These have now been carried out as follows:
 - a) A **Legionella** Risk Assessment was carried out at the Grantown on Spey site in September 2014. This highlighted a number of issues relating to lack of proper process and procedure in complying with regulations. As a result of this, the Authority has now implemented a Legionella Management System. Through this, we have an adopted Legionella policy; have appointed a Responsible Person, Competent Person and Duty Holder who are accountable for delivering the Management System; have a flushing regime in place for showers and little used outlets that is carried out and recoded in a Legionella log book; are managing Legionella risk through monthly, recorded temperature monitoring; have engaged a contractor to carry out quarterly cleaning and disinfecting of the shower heads.
 - b) The risk assessment identified several issues relating to the age and condition of our cold water system, and as a result, following an initial remedial clean and disinfect of all cold water storage tanks, the plumbing system was altered, and the cold water storage tanks were removed and replaced by a mains fed pressurized system. Following this activity, Legionella samples were taken of our water supply, and the results indicated that there was no Legionella in the system.
 - c) A follow up Legionella risk assessment is being carried out mid-March, and we anticipate that our risk rating will be now deemed to be low.
 - d) The Ballater site is different in that we lease just a *section* of the Hall from the Hall's Committee. We are managing the Legionella risk in the water that directly enters our office through temperature control, which is being logged. Samples have recently been taken of this water supply and we are awaiting the results. We have been in contact with the Halls Committee and have made them aware of their responsibilities with regards Legionella control, and are waiting on their response.
 - e) A **Fire** risk assessment was carried out at the Grantown office in September 2014. This highlighted several issues, including the need for fixed wire testing and PAT testing (portable appliances), both of which have now been done. We have also made improvements to the office including replacing fire resistant strips on doors and removing the security door pads between the Reception doors as these were not failsafe devices and would not open automatically in the event of the fire activation. We have drafted a Fire Safety policy to co-ordinate all our existing fire safety activities, log books etc.
 - f) At the Ballater office, the Halls committee have been advised of their responsibility to carry out a fire risk assessment on the entire site, and we are waiting on confirmation that this will be one. The Halls Committee are also in the process of organising fixed wire and PAT testing.
 - g) An **Asbestos** survey was conducted at the Grantown office in November 2014. Fibres containing asbestos were found to be present in the boiler room and in the Board room ceiling void. We have now produced an asbestos management policy

which states the location of known asbestos and how we plan to deal with it and prevent accidental access. The decontamination of the Board room ceiling will be dealt with as part of the work to be undertaken on the new extension. The hatch has been sealed off and stickers placed there accordingly to inform of the presence of asbestos. The boiler room has been decontaminated and is now safe to access.

Policy

5. The overarching H&S policy was revised and updated in March 2014. The policy was circulated to staff, who had to confirm that they read and understood the policy. The policy is also handed to all new staff during their induction process, and a line managers' induction tool kit is in place, highlighting the key policies that line managers are obliged to go through with new staff – these include the overarching H&S policy, and additional relevant H&S policies.
6. LLTNPA's H&S adviser currently updates CNPA on which H&S policies are required. To this end, several new H&S policies have been adopted, including the Driving at Work Policy; Accident and Near Miss Policy; Display Screen Equipment Policy; First Aid Policy; Legionella Policy; PAT Testing and Personal Protective Equipment Policy. There are also several draft policies that are still to be agreed pending adoption, including Slip, Trips and Falls Policy; Fire Safety Policy; Control and Management of Contractors Policy. All these policies formalise practices that were being carried out anyway, but had not yet been formalised in policy terms.
7. All H&S policies are to be reviewed annually.
8. A H&S Roles and Responsibilities document has been drafted and adopted. This document sets out the various roles for H&S across the organisation – and was sent to all staff, who again had to confirm they read and understood the policy. Copies of this document, together with the chart identifying roles and responsibilities are displayed on the H&S notice boards.

Training

9. We have implemented a number of H&S training courses over the last 12 months:
 - a) All appointed fire marshals have done the Fire Marshall Training (which will now be repeated every 2 years), and the appointed first aiders have done Emergency First Aid at Work training (to be repeated every 3 years).
 - b) We are putting all field staff on a 2-day emergency first aid *outdoors* course, which covers first aid situations whilst out in the field.
 - c) All staff have to do the Fire Safety course, and to date approximately 85% have done the course, with a mop-up scheduled for end March.
 - d) We now subscribe to the British Safety Council's on-line H&S training, and through this, all staff are required to do an on-line H&S course, all line managers are required to do the Line Manager's module and all staff are required to do the Manual Handling module. We are able to monitor this and chase up staff who have not done the training.
 - e) To date, only the Corporate Services Director and Facilities Manager had done the Institute of Occupational Safety and Health Training (IOSH). This is a 3 day course

that provides key staff with the basics of H&S around policy, roles and responsibilities, risk assessments and legislation. We identified that it was appropriate to extend this training, and 5 more staff have now done the course, including the Head of Organisational Development, the Governance and Corporate Performance Manager, and one of our Admin Support Officers, who is also our H&S Officer.

- f) A Legionella Awareness training course was recently provided for all named persons within the Legionella Management System, and a few other key staff.

Risk Assessments

10. We have been through a large exercise of updating all our internal H&S risk assessments. To this end, we now have a suite of generic risk assessments, which identify general risks and suggested controls. Such risk assessments include: Stress; Driving at Work; Public Transport; Lone working; Dealing with Aggressive Behaviour; Office Procedures etc.
11. We have also updated the personal risk assessment form that all staff MUST complete, supported by their line managers. This risk assessment identifies specific risks associated with that role, as well as the generic risk assessments that may apply to that post. Staff are then required to read, sign and retain the applicable generic risk assessments. This exercise is done annually, and will therefore be reviewed and implemented again in October 2015.
12. We have identified that the greatest risks to our staff are lone working and driving at work. We have an existing lone working “buddy system” policy, but it is reliant on colleagues and family and needs to be updated. We have purchased four GPS SPOT trackers, for staff to use when out in the field. We also have five H&S backpacks with essential H&S kit (e.g. waterproofs; tick remover; hard hat, ear muffs; whistle, compass, ice grips, blanket etc), and staff are advised to take these kits with them whenever they take out a pool car, or are likely to be going on site/field visits.

Next Steps

13. Whilst we have come a long way over the last 12 months in terms of tightening up on our H&S policy and activities, there is still work to be done.
14. We are still in the process of developing our H&S objectives for the next 1 – 5 years. This will include identifying a rolling action plan of policy, training and risk assessment review. We have a H&S group that currently meets every two months, and reports to the CEO every 6 months. This group will be responsible for overseeing and signing off the H&S action plan.
15. We are aiming to produce a H&S leaflet for all staff, which will provide links to the more detailed policy and procedure documents, but will essentially contain short bullet points about each area of H&S staff should be aware of. This will ensure information is appropriate, and easily accessible to all staff.
16. We are reviewing our Lone Working (buddy system) Policy, and will be purchasing a telephonic lone working system, that ensures all lone working staff have access to an

emergency call centre through their telephones (landline and mobile). We anticipate this will be in place by April 2015.

17. We are putting our Governance and Corporate Performance Manager through the National Examination Board in Occupational Safety and Health (NEBOSH) training. This certificate qualification will enable her to be CNPA's H&S Adviser, that role currently being carried out by the LLTNPA H&S Adviser. We recognise the need for someone in-house to have this knowledge. This officer has now taken over the role of H&S Representative from the Facilities Manager, and together with the Head of Organisational Development will lead on developing and implementing robust H&S policy and procedures for the Authority. She will take on the H&S adviser role once she gains the qualifications, and will thereafter conduct the annual H&S audit.

Recommendation

18. **The Committee is requested to note the progress made to date on H&S activity, as summarised in the paper.**

Kate Christie

katechristie@cairngorms.co.uk

Helen Jenkins

helenjenkins@cairngorms.co.uk