



Exeter City Council

Environmental Health Commercial Services

Health and Safety Service Plan 2008-2009

Robert Norley
Head of Environmental Health Services



CUSTOMER SERVICE EXCELLENCE

CONTENTS

INTRODUCTION

SECTION

1. Service Aims and Objectives
 - 1.1 Aims and Objectives
 - 1.2 Links to Strategic Objectives and Plans
2. Background
 - 2.1 Profile of Authority (inc. Organisational Structure)
3. Service provision
 - 3.1 Profile of Businesses in Exeter
 - 3.2 Inspection Programme
 - 3.3 Complaints / Requests for Advice
 - 3.4 Statutory Notifications
 - 3.5 HELA Strategy / Health and Safety Commission Strategic Plan
4. Service Delivery
 - 4.1 Enforcement
 - 4.2 Staff Resources
 - 4.3 Staff Skills
 - 4.4 Financial Resources
 - 4.5 Consultation with Stakeholders
5. Performance
 - 5.1 Targets
 - 5.2 Review of Performance for 2007/08
6. Action Plan for 2008/09
7. Appendices
 - Appendix 1 Structure Charts – Council/Committee
 - Appendix 2 Visit Performance Analysis
 - Appendix 3 Demarcation of Districts

Introduction

This document is Exeter City Council's Health and Safety Service Plan. It forms the basis of the health and safety enforcement function for the authority and ensures that national health and safety priorities are addressed along with locally identified needs. It demonstrates our commitment to improving Health and Safety outcomes, sets out our priorities and planned interventions for the current year and targets them to maximise their impact.

The Council has a duty to act as an enforcing authority for health and safety in premises for which it is responsible – this is predominantly in the service sector. The plan outlines how the Environmental Health Commercial Section will undertake that function.

It has been produced to ensure that local businesses, employers and employees, members of the public, council officers and Members understand the approach to health and safety adopted by the Council. The service plan will help to ensure that the actions of the Council are fair, consistent, open and effective.

In past years the Council has been guided by the Health and Safety Commission who has issued guidance under Section 18 of the HSWA. From April 2008, Section 18 will become a 'Standard' with which the Council must comply. A three year timetable to achieve full compliance has been established. The Section 18 Standard applies to local authorities and Health and Safety Executive enforcement staff. The three year period will allow for further development for joint competency framework, priority planning approach and joint assessment techniques.

During the year the HSC will merge with the HSE to become a single body to be known as the HSE.

SECTION 1
SERVICE AIMS AND OBJECTIVES

1.1 Aims and Objectives

- 1.1.1 It is Exeter City Council's aim to actively improve Health and Safety for outcomes people working in the City and members of the public who visit or are affected by workplaces in the district.
- 1.1.2 We will endeavour to develop new ways to establish and maintain an effective health and safety culture so that all employers take their responsibilities seriously, the workforce is fully involved and risks are properly managed.
- 1.1.3 Work will be targeted to manage the risk in high-risk, poor-performing and rogue trader businesses. It will be proportionate, consistent and transparent and have suitable monitoring and review systems.
- 1.1.4 The Council is mindful of the burdens on local businesses particularly where, for example, the economy is seasonal and subject to fluctuation. The Council will work in partnership with the Health and Safety Executive (HSE) and with local businesses offering information, advice and assistance.

1.2 Links to Strategic Objectives and Plans

- 1.2.1 The Council is committed to working with all relevant stakeholders in order to achieve its vision, playing a part in LAAS where appropriate. The key strategic objectives are:

Strategic Objective	Vision Theme
Enhance and protect the environment, reducing the causes and minimising the impact of climate change.	City where the environment is cared for
Further improve the character of the city and facilities for culture and leisure	Cultural and fun place to be. City where people are healthy and active.
Ensure that Exeter is a buoyant, dynamic and innovative regional city with sustainable growth.	A prosperous city.
Have strong and clear governance arrangements that enable the communities of Exeter to influence and help shape decisions about their locality and the city.	Excellence in public service.
Use resources effectively and provide high-performing, value-for-money services that focus on customer needs.	Excellence in public service.
Promote and extremely positive image and reputation and ensure high levels of customer satisfaction.	Excellence in public service.

SECTION 2 BACKGROUND

2.1 Profile of Authority

- 2.1.1 Exeter City Council's area of enforcement has a population of approximately 111,000 people. It covers an area of 4774 hectares comprising a mix of residential and commercial properties as well as industrial and trading estates. Although set in a predominantly urban area the City offers only a limited range of industry with the main activities being retail sales, office activities, warehousing and distribution.
- 2.1.2 Appendix 1 shows the **organisational structure** of Exeter City Council and the Committee structure. The Commercial Section is within Environmental Health Services, part of the Community and Environment Directorate which reports to the Scrutiny Committee - Community.

SECTION 3 SERVICE PROVISION

Exeter is predominantly an urban area and the area has many small businesses. The Council is responsible for around 2502 premises.

3.1 Profile of Businesses in Exeter

The Council enforces health and safety in mostly small and lower risk businesses that are predominantly in the service sector and are generally as described in paragraphs 2.1.1.

3.2 Inspection Programme

- 3.2.1 The Council uses the guidance given in HELA Circular (67/1 Revised 3) to risk rate its premises and prioritise its visits. The guidance categorises premises with a score that determines the inspection frequency. This ranges from annual to 2 yearly inspections for higher risk premises.

Lower risk premises are reached by other intervention strategies, many of which will be in partnership with other Devon Authorities and the HSE.

We aim to focus Health and Safety enforcement resources into areas where they are likely to have the greatest impact. In the coming year we shall concentrate on specific topic areas (See 3.5.2) during proactive inspections and reactive investigation, rather than complete all-encompassing inspections. These areas have been identified nationally as contributing to the highest rate of accident/incidents and ill health at work, across all health and safety enforcing authorities.

Scope will be retained to meet individual service needs of the City and local businesses.

3.2.2 The premises profile according to the inspection rating scores are as follows:

Highest hazard/Risk	A	7
Intermediate hazard/ Risk	B1	33
	B2	134
Lowest hazard/Risk	B3	411
	B4	616
	C	787
	U	514

3.2.3 Low risk premises do not form part of the main inspection programme but health and safety issues may be addressed during food, and licensing inspections or following complaints or accidents. A proportion of low risk premises (those approached by other intervention strategies) will be inspected each year.

3.2.4 The Council still has a duty to enforce health and safety standards in low risk premises and we will work with such businesses to improve health and safety standards.

3.2.5 The visit performance analysis for the last year is detailed in Appendix 2.

3.2.6 The database will be continually updated in conjunction with the Business Support Team who will actively pursue a street/district premises audit (4yr programme).

3.2.7 A proportion of uncategorised premises will be visited, though the active audit (see above) may influence progress as new premises are identified.

3.3 Complaints / Requests for Advice

3.3.1 The authority has a duty to investigate complaints about health and safety conditions/issues and about its health and safety service provision.

3.3.2 A number of complaints/service requests about health and safety are received annually, all of which will be investigated or passed to other relevant agencies. (161 service requests were received in 2007/8).

3.3.3 No complaints have been received regarding the service provision of the Authority.

3.4 Statutory Notifications

3.4.1 Prescribed accidents, dangerous occurrences and occupational diseases are reportable under the Reporting of Injuries, diseases and Dangerous Occurrences Regulations 1995. Accidents would include fatalities and accidents involving visits to hospital or more than 3 days off work. Certain accidents involving employees, the self-employed and members of the public are also reportable.

3.4.2 The Council has a duty to investigate accidents to determine whether offences have been committed and to prevent a recurrence. The authority also receives notifications of certain unsafe equipment and must respond and investigate such notifications. Decisions as to which accidents require a full investigation are made by the District Environmental Health Officer and overseen by the Principal

Environmental Health Officer (PEHO), Health & Safety or the PEHO (Food Safety) in his absence.

The Council is committed to reducing workplace accidents.

3.4.3 As a 'responsible authority' for the purposes of the Licensing Act 2003 and the Gambling Act 2005 the section has a duty to respond to premises licence applications etc. A number of applications will require scrutiny, some of which may require amendments by negotiation. The impact of this new workload will be monitored this year, and may have a detrimental effect on the service work plan.

3.5 HELA Strategy / Health & Safety Commission Strategic Plan.

3.5.1 The Authority has a duty to focus its activities on national priorities and strategies and in particular the Section 18 Standard to secure a reduction in accidents and ill health in the workplaces for which we are responsible. The Standard recognises that 'partnership' is the way HSE and LAs do business and reflects the statement of intent agreed between the HSC, HSE and ourselves.

3.5.2 Strategic themes, which will continue for 2008/09, are:

- Slips and trips
- Falls from height
- Workplace transport
- Disease reduction – dermatitis, asthma and asbestos
- Musculoskeletal disorders
- Noise and vibration awareness training of new regulations
- Violence
- Royal Mail (see Section 6)

3.5.3 The work of the Commercial Section will address other issues when undertaking visits/developing initiatives in workplaces; health at work is an important issue. Interventions with regard to new compliance responsibilities to reduce exposure to occupational tobacco smoke will continue to be considered.

3.5.4 European Health and Safety Week is a national event, which the Council has always supported as a means of raising the profile of health and safety during this week.

3.5.5 The Council offers leaflets and posters in different languages (and must offer translation services if necessary) for the performance of its functions. The service endeavours to be resourced to ensure equality of access to information. Training courses for Level 2 and Level 4 Health and Safety qualifications as well as Manual Handling and Risk Assessment are now provided.

SECTION 4

SERVICE DELIVERY

4.1 Enforcement

4.1.1 Enforcement (or the fear of enforcement) is an important motivator for rogue employers. Evidence confirms that enforcement is an effective means of securing compliance and promoting self-compliance. We will work in partnership with the HSE, other enforcement agencies, regulators and stakeholders to secure proportionate compliance with the law and to ensure that those who have duties under it may be held to account for failures to safeguard health and safety and welfare. The scope of these activities will continue to be evidence based and is clearly set out in the Council's enforcement policy statement.

4.2 Staff Resources

4.2.1 The Standard requires the Council to have sufficient capacity to undertake our statutory duties. Exeter City Council Environmental Health Services, Commercial Section, is split into 4 districts. Each district is allocated to a full time equivalent District EHO on all functions relating to the Commercial Section and the PEHO (Food) also has responsibility for some premises across the City. Appendix 3 shows the demarcation of the districts.

4.2.2 One PEHO (Health and Safety) is a lead officer for Health and Safety and will co-ordinate the health and safety function with the PEHO (Food Safety) and the EHM.

4.2.3 All officers in the Commercial Section will undertake health and safety duties along with their other functions which include food safety, training, health initiatives, some licensing duties and infectious disease control.

4.2.5 The staff resources allocated to the functions is currently deemed adequate to fulfil the Council's duties. However, it is likely the Council will become responsible for many new premises and resource allocation will require regular review. As in 2007/08, officers will vary their approach to the health and safety inspection programme to enable them to meet Performance Indicators by targeting resources on high-risk premises and national priorities

4.3 Staff Skills

4.3.1 The Section has a procedure for authorisation of officers and only trained and competent staff will be able to undertake health and safety duties. The authorisation, and hence action they can take, for each officer will reflect their personal skills. The lead officer and Environmental Health Manager also have core qualifications and additional technical skills in health and safety.

4.3.2 Work toward ensuring full alignment with the competency framework will begin this year.

4.4 Financial Resources

4.4.1 The Section has a modest budget for equipment, printing and miscellaneous items. The level of the resources allocated to the service will be reviewed annually to reflect the changing nature of the work.

4.5 Consultation with Stakeholders

- 4.5.1 The Health and Safety at Work etc Act 1974 placed general duties on all employers to protect the health and safety of their employees and those affected by their work activities. Its goal-setting approach makes clear that those who create risks are best able to manage them. We will make clear that effective health and safety management is a collective responsibility in which individuals too must play their part.
- 4.5.2 Experience shows that many organisations do not contact us. Some may be fearful of contact, which deters them from seeking advice. We continue to explore new ways to establish and maintain an effective health and safety culture, so that all employers take their responsibilities seriously, the workforce is fully involved and risks are properly managed.
- 4.5.3 We will demonstrate the moral, business and economic case for health and safety. Appropriate health and safety management is an integral part of effective business management and, we will promote it as an enabler and not a hindrance.
- 4.5.4 We will explore ways to promote greater access to authoritative health and safety advice and guidance and we will continue to offer advice in the course of our other enforcement activities where appropriate.
- 4.5.5 It is essential the Commercial Section consults with business to ensure the service delivered reflects requirements made by government bodies and the needs of its businesses. The Section needs to continue to improve the consultation it undertakes with its businesses. Customer service questionnaires will continue to be used for all inspections in 2008/09.

SECTION 5 PERFORMANCE

5.1 Targets

5.1.1 Local Performance Indicators for 2008/09:

- The Environmental Health Service Plan sets an inspection performance target of 100% inspection of high-risk premises.
- Respond to complaints within 5 working days.

5.1.2 There are many performance targets for the unit to meet in addition to the requirement to comply with Standard issued by the Health and Safety Executive.

5.2 Review of performance 2007/08

- Information held on a database is continually reviewed and updated. Data, including premises identified in the district surveys but not allocated inspection frequencies, was entered. All new premises are now sent a questionnaire to risk rate them and place them within the inspection programme promptly.
- 96% of inspections due were achieved and a total of 389 (290 in 2007/8) preventative inspections were undertaken.
- 139 (139 in 2007/08) other health and safety visits were undertaken.
- 126 (134 in 2007/08) low-risk premises were engaged by questionnaire and a proportion of these were visited. Dermatitis / glove trial questionnaires were received and analysed as part of a specific topic initiative.
- The new Princesshay premises and others following area surveys were all allocated inspection frequencies.
- Due to disrupted staff provision, the backlog of overdue inspections (resulting from staff vacancies) has unfortunately risen over the year.
- Specific training on a series of health and safety topics was shared with colleagues throughout Devon.
- 4 Manual Handling techniques, courses, 2 Risk Assessment courses and 10 Level 2 Awards in Health and Safety courses were delivered to 344 delegates.
- Two Safety and Health Advice Days (SHADs) were held in partnership with Exeter College focusing on dermatitis in the Hair and Beauty Sector/'Bad Hand' Campaign. 81 delegates attended. We also participated in Phase 2 of the 'Bad Hand' Campaign.
- We helped in the organisation of a series of SHADs directed toward the Hospitality Sector and provided a speaker on asbestos at the four venues.
- An event was held on 'Infection control for those engaged in skin-piercing activities'. Whilst primarily aimed at Exeter skin-piercers, the event was

offered through the other Devon Councils. 51 people attended. ECC officers and staff of the HPA delivered the training content.

- Support was given to the HSE Contract Cleaning SHAD held in Exeter in November. Invitations were sent out to local cleaning companies, though support from them was sparse.
- A Smoke free seminar was held at Sandy Park Stadium. Around 1255 smoke free advisory/enforcement visits have been made during the year.
- The Principal EHO (Health and Safety):-
 - attended meetings of the task and finish group reviewing LAC 67/1 (following a report to HELA the work has since been extended into a research phase for 2008/9 encompassing a more fundamental review of a wider area of priority planning);
 - chaired and contributed to the SW Work Related Death Liaison Group;
 - continued to support the long standing Lead Authority Partnership with Clarks International in relation to their national shoe shop chain.
- Officers attended:-
 - the Stress in Finance Project training session in Taunton (the single finance organisation identified in Exeter for follow up has been contacted; work is ongoing);
 - the HPA sponsored training on Legionella at Taunton to help forward the regional Protocol and assist in meeting water sampling challenges during investigation of cases;
 - a workshop session run by the Better Regulation Executive Health and Safety Review team to relate our experience of the existing health and safety regime and give views on the way forward;
 - a session promoted by HSE – Intervention with Migrant Workers.
- Exeter hosted:-
 - a meeting on partnership working with HSE, South Hams DC and Mid Devon DC towards the HSE lead SPAR/Gregory MGS 3 project;
 - the first of two meetings to forward a LA/HSE Inspection Pack for assessing Management Systems, being developed by the HSE.
- A Health and Safety Handbook was published, funded entirely by advertising. Distribution means include initial contact with new businesses, City Council run training courses; preventative inspections and SHAD type initiatives. The page content of the handbook will appear on the Council's website.
- Over 400 preventative interventions have been carried out. 126 targeted Self Inspection Questionnaires have been used as alternative influencers. Final statistics await full collation.

SECTION 6
ACTION PLAN FOR 2008/09

1. Collate feedback from businesses and use data to inform consultation process and develop a newsletter.
2. Participate in the pilot work on developing the competency framework.
3. Complete the agreed quota of targeted risk based inspection programme (re A.B1-B3) for 2008/09 focussing on the HELA topic priorities.
4. Implement the Enforcement Management Model and review procedures to reflect Health and Safety Commission requirements.
5. Aim to complete specific topic-based (Fit 3) projects in partnership with the HSE and others. This will include exploring the benefits of closer partnership working with other EAs and stakeholders to make best use of joint resources to maximise our impact on local, regional and national priorities.

Fit3 – fit for work, fit for life, fit for tomorrow
Work in the LA enforced sector in 2008/09

Project	What	Where	When
Slips and trips	To reduce the number of major-injury slip and trip accidents by raising awareness and improving management of slips and trips. To also provide advice on practical control measures and take enforcement action where appropriate.	In food retail, building and plant maintenance, and all sectors with catering and cleaning issues.	All year (though catering and hospitality from April – June 08).
Falls from height	To raise awareness of falls from height risks, improve the management of working at height; to give advice on practical control measures; and to take enforcement action where appropriate.	Retail, wholesale and warehousing, hotels, catering and hospitality, and offices.	All year (though catering and hospitality from April – June 08).
Asbestos	To raise awareness of the duty to manage asbestos amongst building occupiers, and take enforcement action where there is poor compliance.	All sectors.	All year.
Dermatitis	To raise awareness of dermatitis, provide advice and support to the industry, and take enforcement action where appropriate.	Hairdressing and beauty, and also in sectors where catering or cleaning is involved.	All year.
Asthma	To reduce the incidence of occupational asthma with the baking industry and other industries where flour is used; to raise awareness of asthma, to promote use of appropriate	Baking industry and other workplaces where flour is used (e.g. supermarkets, restaurants, retail and craft bakeries,	All year.

	control measures; and to take enforcement action where appropriate.	etc.).	
MSDs	To raise awareness of MSDs, encourage reasonable practicable control measures, and take enforcement action as appropriate.	All sectors - especially retail, cleaning, warehousing, residential care homes, and finance sector (for DSE).	All year.
Noise	To raise awareness of the Control of Noise Regulations, and the availability of simple and practical industry-specific guidance to assist dutyholders.	Music and entertainment sector.	All year.
Royal Mail	To achieve jointly established health and safety targets with an agreed timetable via local action plans.	Sorting and delivery offices.	To be decided.
Stress	To encourage financial services organisations to improve workers' health and wellbeing by using the Stress Management Standards for work-related stress, or an equivalent approach.	Financial services sector – including insurance companies, building societies, and investment and high street banks.	All year.
Violence	To reduce the number of work-related violence incidents through use of work-related violence toolkit, which is designed to assist employers in carrying out risk assessments.	Retail, restaurants, and bars, pubs and clubs.	All year.

6. Continue the low risk inspection strategy by:

- 1) Proactively visiting a residual proportion of low risk premises
- 2) Producing an annual Health and Safety newsletter
- 3) Continuing self-audit questionnaires for low risk premises until revised guidance is issued, when this approach will be reviewed
- 4) Review the arrangements for achieving target PIs and amend the policy if necessary

7. Work to implement legislation to reduce occupational exposure to tobacco smoke.

FLOW DIAGRAM SHOWING THE COMMITTEE STRUCTURE FOR THE COUNCIL

