

Chairperson and Committee Members
AUDIT AND RISK COMMITTEE

16 FEBRUARY 2017

Meeting Status: **Public**

Purpose of Report: For Information

HEALTH AND SAFETY QUARTERLY REPORT

PURPOSE OF REPORT

- 1 This report presents the Health and Safety Quarterly Report for the 1 September 2016 – 31 December 2016 period. The report includes September 2016 data due to the timing for the end of the last triennium.

DELEGATION

- 2 The Audit and Risk Committee has delegated authority to consider this report under the following delegation in the Governance Structure, Section B.3:
 - *Ensuring that Council has in place a current and comprehensive risk management framework and making recommendations to the Council on risk mitigation;*
 - *Assisting elected members in the discharge of their responsibilities by ensuring compliance procedures are in place for all statutory requirements relating to their role;*
 - *Governance role in regards to the Health and Safety Leadership Charter and Health and Safety Plan.*

BACKGROUND

- 3 The quarterly reporting to this Committee on the status of health and safety within the Council provides both a summary of progress on health and safety initiatives and activities and also a high level overview of the organisational health and safety work programme. This is consistent with legislative requirements and good practice and supports Officers in meeting their due diligence responsibilities.
- 4 At the end of the last triennium the Council resolved to adopt a Health and Safety Leadership Charter but only until March 2017 to enable the incoming Council the opportunity to review the document as needed. Due to meeting schedules and the health and safety work programme, the charter was presented in conjunction with the Health and Safety Plan 2016 -2018. This entire document is attached as Appendix 2. A separate report on the review of the charter will be submitted to Council at the Council Meeting scheduled for 2 March 2017.

CONSIDERATIONS

Policy considerations

5 There are no Policy considerations.

Legal considerations

6 There are no legal considerations.

Financial considerations

7 There are no financial considerations.

Tāngata whenua considerations

8 There are no tāngata whenua considerations.

SIGNIFICANCE AND ENGAGEMENT

Degree of significance

9 This report does not trigger the Council's Significance Policy.

Publicity

10 There are no publicity considerations.

RECOMMENDATIONS

11 That the Audit and Risk Committee notes the Health and Safety Quarterly Report included as Appendix 1 to Report CE-17-087.

Report prepared by	Approved for submission	Approved for submission
Jill Dallinger	Dianne Andrew	Wayne Maxwell
Health and Safety Advisor	Organisational Development Manager	Group Manager Corporate Services

ATTACHMENTS

Appendix 1

- Health and Safety Quarterly Report 1 September 2016 - 31 December 2016.

Appendix 2

- Kāpiti Coast District Council Health and Safety Leadership Charter and Health and Safety Plan 2016 - 2018

KĀPITI COAST DISTRICT COUNCIL
Health and Safety Quarterly Report to the Audit and Risk Committee
1 September 2016 – 31 December 2016

Executive Summary

Due to timing for the end of the last triennium, this Quarterly Report includes information for an extra month (September). This report provides information on the health and safety status of the organization which in turn aims to assist elected members in meeting their due diligence responsibilities as summarized in the Health and Safety Leadership Charter. (See Appendix 2)

Please note that the format of this quarterly report has altered slightly to that of previous reports to more clearly show our lead and lag indicators. In health and safety terms “Lead” indicators represent safety performance and continuous improvement - what is being done to prevent and control harm in the workplace. A ‘Lag’ indicator measures the incident/harm history.

To ensure the organisation effectively progresses continuous improvement initiatives and the changes made are complying with the parameters of the new Health and Safety at Work Act, an audit by an external party will be carried out by 30 June 2017. Further information on this project will be provided in the next quarterly report.

Key Updates

- Council received notification late September that the ACC Work Safety Management Practices (WSMP) 2 yearly audit is ceasing. The organization will retain its WSMP Tertiary rating until April 2018. ACC are requesting employers explore alternative options for levy discount via the tools they are promoting.
- The Worksafe NZ Star Safety Rating (SSR) project review was completed on the 30th September 2016. The review by the Select Committee is expected to conclude by April 2017. Progress will continue to be monitored and updates provided accordingly.
- Following consultation the organization has:
 - a new Worker Participation Agreement
 - a revised Health and Safety Policy Statement
 - 2016/2017 Health and Safety Annual Objectives
 - a new policy - Preventing and Responding to Workplace Bullying
 - a Policy Review work program which to date includes:
 - completion of our Visitor Policy and Smoke Free Workplace Policy
 - draft reviews completed for Contractors Policy, Emergency Preparedness Policy and the Working Alone Policy, all of which will be presented to the Health and Safety Committee for consultation in February; and
 - completion of an internal audit of the Contractor Register and Contractor Management process.

Jill Dallinger
Health and Safety Advisor

LEAD INDICATORS

1. CORPORATE HEALTH AND SAFETY TRAINING COMPLETED

number in () indicates the number of employees

- Confined Spaces (1)
- First Aid Comprehensive Course (28)
- Traffic Safety Management (1)
- Managing Multiple PCBUs – Contractor Management (20)
- Health & Safety Representative (3)

2. EMERGENCY EVACUATION DRILLS - 6 MONTHLY ROTATION

- Successful drills completed on 1 September 2016 and 5 December 2016.

3. EMPLOYEE H&S INDUCTIONS

- 27 inductions completed

4. WELLNESS INITIATIVES

number in () indicates the number of employees

- Annual influenza vaccinations due April/May 2017
- Annual hearing assessments due August 2017
- Ergonomic workstation assessments (4)
- Eye examinations (7)
- EAP Services (25 hours)

5. PRE EMPLOYMENT MEDICAL MANAGEMENT

number in () indicates the number of employees

- Drug and Alcohol (27)
- Tetanus and Hepatitis A/B (0)

6. STANDARD OPERATING PROCEDURE REVIEW - INFRASTRUCTURE SERVICES GROUP

- Operations team managers continue to progress the Standard Operating Procedures in discussion with the Operations workers and the Operations Working Group. Managers have committed to completing the Operations manual by May 2017.

7. CONTRACTOR MANAGEMENT - APPROVED CONTRACTORS

As at 31 December there were 175 Contractors in our database.

An audit of the approved contractor database was carried out to ensure alignment with the new legislation parameters. The audit identified inconsistencies within the data capture and a review of each contractors' documentation was commenced.

The audit results were reported to the Senior Leadership team 12 December 2016 and thereafter regular updates are provided on the significant progress being made.

To date the work on this database has resulted in contractors being archived, new contractors added and current contractors updated and/or redefined. Further work will continue with a completion date expected by the end of February 2017.

8. RISK MANAGEMENT

- SLT completed two council work site visits this period on 7 November 2016: Ōtaki Library and Ōtaki Parks and Reserves Depot. Observations and actions/recommendations are monitored, reviewed and closed off through the SLT Action register:
 - Ōtaki Parks Depot: Showers and cloakroom area refreshed; separate room allocated for tools; obsolete equipment from old storage shed removed; general yard tidy up; review of storage sheds going forward and; review of security gates.
 - Ōtaki Library: Faulty lights – reviewed and repaired; lock placed on general store cupboard; power points in floor fitted with covers; and review of mobile shelving units.
- Paekakariki Library: Moveable shelving with broken castor wheels – repaired

9. HEALTH AND SAFETY COMMITTEES (HSC)

SEPTEMBER 2016

- The Health and Safety Committee and the Operations Working Group met once during this period in September. Key outcomes included confirming the draft Terms of Reference for Worker Participation practices and continuous improvement review for the SOP project.

10. POLICY REVIEW PROGRESS

The following policies were reviewed and approved

- Leadership Charter
- Health and Safety Annual Plan 2016/17
- Worker Participation Agreement
- Health and Safety Policy Statement
- Visitors Policy
- Smokefree Workplace Policy
- Preventing and Responding to Workplace Bullying (new policy)

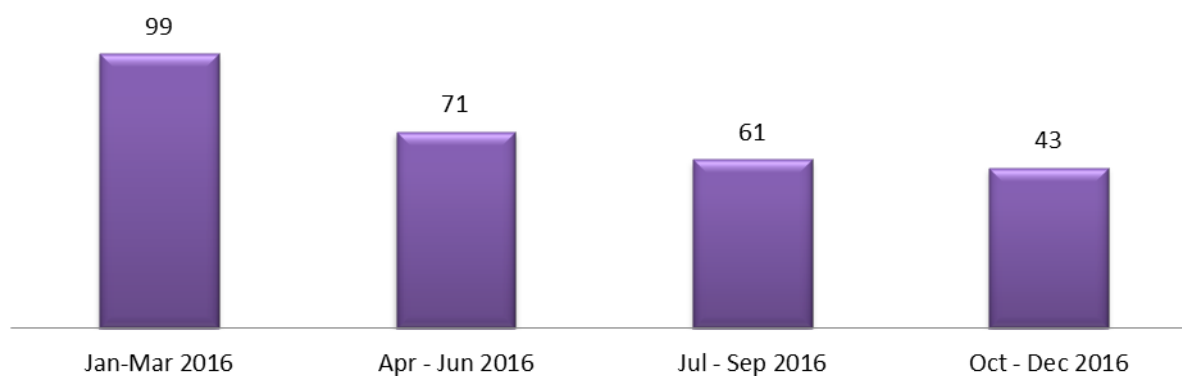
The following policies were drafted and are currently under review for completion by May 2017

- Drug and Alcohol in the Workplace
- Contractor Management
- Personal Protective Equipment

LAG INDICATORS**11. INCIDENTS, INJURIES AND NEAR MISS 1 SEPTEMBER 2016 – 31 DECEMBER 2016**

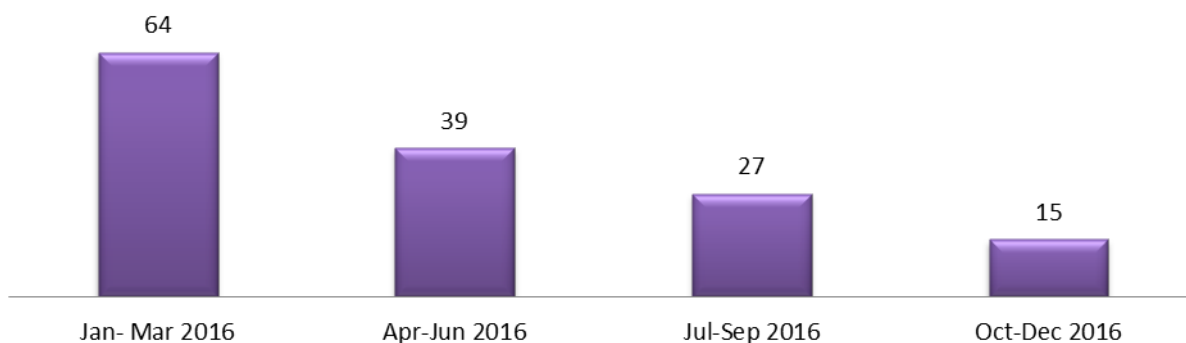
	Non-Notifiable Incident/Injury	Notifiable Incident	Notifiable Injury	Near Miss	Total
Community Services	11	-	-	6	17
Infrastructure Services	17	-	-	5	22
Corporate Services	1	-	-	1	2
Regulatory Services	1	-	-	1	2
Strategy and Planning	-	-	-	-	-
Chief Executive	-	-	-	-	-
Third Party	-	-	-	15	15
Total	30	-	-	28	58

- *Notifiable Incident: Peoples Health and Safety are seriously threatened or endangered as a result of a work situation*
- *Notifiable Injury: Injury that requires (or would usually require) person to be admitted to hospital for immediate treatment or receive medical treatment within 48 hrs of exposure to a substance*

Total Incidents - Council

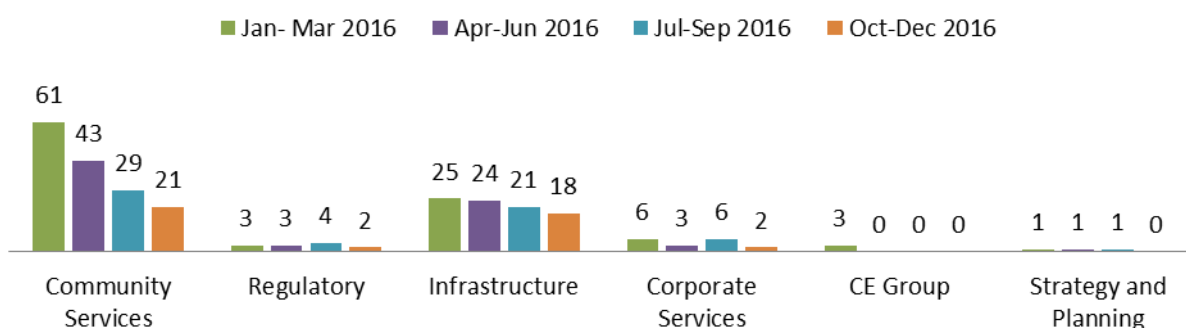
Investigations were completed (minor) and recommended actions undertaken / completed. Two incident investigations underway in December are due for completion by the time this report is tabled.

Total Incidents - Third Party



- *Third Party is defined as a party that is not a direct employee of the Council*

Total Incidents - by Group



12. ANNUAL LEAVE MANAGEMENT

The use of annual leave is currently monitored and managed at the Group level to ensure the application of adequate rest and recreation breaks support overall wellbeing. Analysis is being developed for future reports.

13. SICK LEAVE USAGE 1 OCTOBER – 31 DECEMBER 2016 (HOURS)

COUNCIL QUARTERLY COMPARISON - 2016

	ACC	ACC Non-Work	Sick Leave	S/L as A/L	S/L as LWOP	S/L for Dependent
Jan-Mar 2016	136	216	2627	103	52	418
Apr-Jun 2016	356	109	2932	308	8	555
Jul-Sep 2016	382	143	3948	308	88	923
Oct-Dec 2016	589	630	3039	359	84	946

- *Sick leave taken as Annual leave shows an increase and will continue to be monitored*
- *ACC related increases in the Oct-Dec period are related to 3 specific instances which required extended absence*
- *Capturing and reporting of data is improving*

**KAPITI COAST DISTRICT COUNCIL
LEADERSHIP CHARTER AND HEALTH AND SAFETY PLAN 2016/2018**

1. Vision Statement

Kāpiti Coast District Council will work to achieve a vibrant, diverse and thriving community by being open for business and delivering our services in a caring, dynamic and effective manner. This will be underpinned by an organisational culture that supports and encourages a healthy and safe working environment achieved through effective and inspired senior leadership, influence and shared learning.

2. Health and Safety Leadership Charter

Under the Health and Safety at Work Act, Elected Members and the Chief Executive are the Officers of our organisation. As Officers, Elected Members subscribe to the principle that nothing is more important than the health and safety of its workers, and those that could be affected by the work being undertaken by, or on behalf of, the Kāpiti Coast District Council.

Elected Members, as Officers of the Kāpiti Coast District Council, acknowledge their responsibility to exercise due diligence, taking reasonable steps to understand the Council's operations and health and safety risks, and to use this knowledge to influence health and safety outcomes by ensuring those risks are managed effectively through an effective health and safety framework.

This Leadership Charter is the key to enabling the effective implementation of the Health and Safety Plan for Kāpiti Coast District Council. All Officers (Chief Executive and Elected Members) commit to fulfilling their due diligence requirements to support the continuous improvement of health and safety functionality in our workplace. This commitment is founded on the principle that the effective management of health and safety is essential to the operation of a successful and thriving organisation.

Specifically, Kāpiti Coast District Council Elected Members in their capacity as Officers commit support to the following and take personal responsibility:

- To ensure as Officers they remain current in their knowledge of health and safety matters;
- To ensure the Council has and uses, appropriate resources and processes to identify then eliminate or minimise health and safety risk;
- To strive for continuous health and safety improvement and to provide leadership and support to the Chief Executive to achieve this;
- To ensure Council is an environment that engages with workers on matters which will or are likely to affect their health or safety;
- To have worker participation practices that provide workers with reasonable opportunities to participate effectively in improving health and safety;
- To take the opportunity to verify processes that are put in place; and
- To extend health and safety efforts, wherever relevant, beyond the workplace recognising and supporting related initiatives within the community.

The attached plan sets out how the Council intends to provide a safe workplace for all those that undertake Council work or may be influenced by Council work being undertaken.

Objectives	Deliverables	Responsibility	Risk Mitigation	
			Due Diligence	Council Monitor
1. Policy and Planning				
Develop and implement a robust annual health and safety plan for Council with a focus on risk management and continuous improvement.	Plans to be completed and operational by 31 July each year.	Chief Executive/ Group Managers will provide a high level oversight. An operational and more detailed work plan will set out the specifics of this high level plan with individual health and safety responsibilities incorporated into the staff PDP documentation.	Original Documents sighted.	Audit and Risk Committee. Senior Leadership Team.
Ensure all contracts for major or minor capital works are Council registered as approved contractors and have health and safety relevant documentation attesting to their competency.	Council audits all Contractor Health and Safety documentation before acceptance on the Council approved Contractor Register. Review of Contractor Register to be completed by 30 June 2017.		Quarterly management reporting.	
Provide informed and relevant access to current H&S policy and procedures to all workers of Council which cover all aspects of best practice health and safety management.	Policy and Procedures available to all workers as relevant in both electronic and hard copy form.		Management Performance Standards.	
Continue to implement a regular policy and procedures review process.	All policies and procedures part of auditable review timetable monitored by the Health and Safety Committee, this includes engagement and consultation with Workers on all H&S policy and procedure changes. Full review of policies due to be completed by 30 June 2017.		Health and Safety Committee quarterly reports.	
Develop and implement an internal audit process utilising the expertise of trained Health and Safety Committee representatives.	Ensure the Health and Safety audit timetable remains fully operational – reportable to the Health and Safety Committee monthly. Internal audit process to extend beyond the Infrastructure Services Group by 30 November 2017.		Independent Audit - 2 yearly. Internal audit reports.	

Objectives	Deliverables	Responsibility	Risk Mitigation	
			Due Diligence	Council Monitor
Continue to progress internal systems and processes for the gathering of accurate information to support health and safety management and reporting.	Systems and processes are developed and continue to provide full support for health and safety management by 1 July 2017.		Reporting is timely and accurate.	
2. Delivery				
Ensure the development of Critical Risk Action Plans to identify and control Council risk caused by the work undertaken, using either elimination or minimisation controls.	Council will have a Risk Action Plan for every work group where critical risk or high probability risk has been identified. Critical Action Plans to be completed by 30 June 2017.	Chief Executive/ Group Managers will provide a high level oversight. An operational and more detailed work plan will set out the specifics of this high level plan with individual health and safety responsibilities incorporated into the staff PDP documentation.	Work Group risk action plans available at the request of the Audit and Risk Committee.	Audit and Risk Committee. Senior Leadership Team.
Ensure a robust and regular risk action plan review process for all areas of Council	Every risk action plan will be reviewed following every notifiable incident and annually by the Health and Safety Committee and in consultation with workers.		Independent Audit 2 yearly. Internal audit reports. Internal quarterly reporting.	
Ensure all Managers performance measures include the standards of Health and Safety Management expected of them to achieve the strategic Health and Safety objectives.	All manager PDP's have clear and measurable health and safety objectives to achieve. Revised health and safety deliverables to be included in PDP documentation for 2016/17 year.		Achievement of personal Health and Safety objectives for senior managers reported annually.	
Ensure that appropriate emergency management plans are in place for all sites and that preparedness is regularly tested.	Continue to progress, educate, implement and regularly test the quality of emergency management plans.		Emergency plans available for scrutiny. Quarterly reporting on preparedness testing.	
Ensure the right level of expertise to advise on Health and Safety best practice and to oversee the technical aspects of health and safety management.	Employ or contract the level of expertise which will provide best practice and technical advice.		Specialist external advice and expertise available to Council if/when required.	

Objectives	Deliverables	Responsibility	Risk Mitigation	
			Due Diligence	Council Monitor
Ensure that appropriate training is available for all workers but in particular for those roles that require more relevant and role specific Health and Safety training such as the Council Health and Safety Representatives.	Continue to build on progress to date regarding internal health and safety inductions and education programmes for workers or contract training programmes to assist those with specific health and safety responsibilities such as H&S representatives and those responsible for managing critical risks. Health and Safety Representative training under new reforms to be completed by 30 November 2016.		Training programme and timetable. Attendance and attainment reporting.	
Facilitate engagement and participation with workers on all matters of health and safety including planning, monitoring and management through accessible worker participation practices.	Workers consulted and active in Worker Participation Practices such as Health and Safety Committee functionality work and operational H&S management. Worker behaviour demonstrates clear understanding of their H&S requirements to not endanger themselves or others in any work undertaken – evidenced through PDP documentation and training records.		Health and Safety Committee quarterly reports. Achievement of personal Health and Safety objectives for senior managers reported on at least annually.	
Proactively manage health and safety risk when undertaking work jointly with other organisations where able and where it is reasonably practical to do so.	Council will consult, cooperate and coordinate with all other businesses on matters of health and safety when working on joint undertakings.		Contractor Tenders. Memorandums of Understanding for health and safety initiatives.	

Objectives	Deliverables	Responsibility	Risk Mitigation	
			Due Diligence	Council Monitor
3. Monitor				
Monitor absence through accident/ illness and EAP usage and ensure staff are supported and returned to work as soon as is reasonable practicable.	Return to work and rehabilitation policies and absence monitoring systems are robust.	Chief Executive/ Group Managers will provide a high level oversight. An operational and more detailed work plan will set out the specifics of this high level plan with individual health and safety responsibilities incorporated into the staff PDP documentation.	Sick leave and accident/ incident/near miss quarterly reporting. EAP usage.	Audit and Risk Committee. Senior Leadership Team quarterly reporting.
Monitor and review all incidents, noncompliance and near misses and be satisfied with the adequacy of the response.	Encourage continuous improvement in processes and reporting of incidents and near misses. Continue to develop enhancement of and implement a review of the incident/accident and near miss reporting process for all incidents including serious incidents.		Quarterly incident/ accident/near miss and serious incident reporting.	
Monitor Manager's quarterly progress against the achievement of strategic health and safety objectives	Manager's to report quarterly on their progress against health and safety objectives to be included under the standing H&S item on SLT Meeting Agendas.		Half yearly report on progress.	
4. Review				
Ensure continuous improvement in health and safety management by regular review of systems and processes.	Develop review timetable and parameters using appropriate reporting/statistical information.	Chief Executive/ Group Managers will provide a high level oversight. An operational and more detailed work plan will set out the specifics of this high level plan with individual health and safety responsibilities incorporated into the staff PDP documentation.	Independent Audit. ACC Audit outcomes. Audit Reports Incident/Accident /Near Miss statistical data. SLT H&S Action Register.	Audit and Risk Committee. Senior Leadership Team quarterly reporting.
Ensure all audit outcomes are affected in a timely and complete manner.	Follow up on audit recommendations.			