

Health, Safety and Well-being



Annual Report

2019-20



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Forewords

"I am very pleased to be writing this foreword to the annual Health, Safety and Well-being report for 2019-20. Since my first appointment to the Fire Authority in 2016 I have always been interested and concerned about the welfare of the most important asset the Service has, its people. Since taking on the role of Lead Member in July 2020 I have spent time shadowing members of the Health and Safety department, as well as discussing with them and other members of staff how best we can protect and support our staff at all times, whilst still providing what the public expect from a front-line emergency service.

Councillor Keith McLean
Lead Member for Health, Safety and Well-being
Buckinghamshire & Milton Keynes Fire Authority

"The Covid-19 global pandemic has presented many different challenges for us in terms of implementing appropriate measures to ensure, so far as is reasonably practicable, the health, safety and well-being of our staff, visitors, contractors and the communities we serve. Although these are unprecedented times, they have also presented us with the opportunity to work in different ways, something that has been embraced by all staff and looks set to continue post pandemic. I am pleased to confirm that all of our sites have been certified as 'COVID Secure'.

Jason Thelwell
Chief Fire Officer and Chief Executive
Buckinghamshire & Milton Keynes Fire Authority

Executive summary

COVID-19 Pandemic: The Service has implemented a range of measures to comply with Government guidance for *Working Safely with COVID-19* in terms of social distancing, maximum occupancy, personal hygiene and cleaning regimes which are audited and monitored. Staff are kept informed of all changes via a robust communications programme in this ever-evolving situation.

Our performance: The safety event statistics for the year 2019/20 identify that there has been a decrease in the number of events in four of the seven areas. A reduction in three of the areas is seen as a positive trend. However, the fourth area is a decrease in the number of 'near misses' reported which is a negative outcome as this highlights a downturn in the proactive reporting – where no injury or loss/damage has been sustained. Two areas remain at the same number as 2018/19 and there has been an increase in one area – vehicle damage.

Station Improvement Planning: An 'audit' style process has been piloted over the past six months across fire stations to ensure that there is an improvement in the way station personnel perform. The aim of the process is to identify key areas which are either a risk or have been seen to be areas of weakness and test the station personnel against what the Service expects from them in these areas.

Employee Well-being: The current focus of the Attendance Management Monitoring Group (AMMG) is on the structure of the group and how the Service captures and reports absence and whether there are ways this could be enhanced.

Overall, sickness absence reduced in 2019/20 for both On-Call and Wholetime staff groups when compared to 2018/19. Support staff, however, saw a significant increase from 4.9 days per person in 2018/19 to 7.3 days per person in 2019/20.

Blue Light Hub: Landlord responsibilities for two partner agencies simultaneously, South Central Ambulance (SCAS) and Thames Valley Police (TVP), is a new role for the Service. Work has been ongoing to ensure that risk assessments, including control of hazardous substances, general and fire risk assessments are in place and have been shared.

Working with others: Work continues with our National Fire Chiefs Council (NFCC) Health and Safety and South East Region colleagues, Thames Valley Health and Safety counterparts and with the members of the Fire and Rescue Risk Group.

COVID-19 pandemic

When the first cases of COVID-19 were identified in the UK at the end of January 2020, a Pandemic Planning Group consisting of key stakeholders was convened which included the Health and Safety Manager.

With rapidly evolving guidance from the Government, work commenced on communications with all staff and implementing the COVID-19 measures (personal hygiene, cleaning regimes, limitations on maximum occupancy and social distancing) across all stations and sites.

Occupancy assessments were carried out which resulted in a 50% reduction in numbers of persons able to occupy rooms, desks etc. Seating plans and guidance was issued to staff to ensure they were aware of what was required of them. This guidance has been reiterated regularly.

The Health and Safety department conducted a review of existing risk assessments to ensure the risks of COVID-19 were captured and new risk assessments were written for 'Working Safely with COVID-19' and were based on the Government guidance and localised to Service requirements.

The Tripartite Agreement/s (agreement between the Fire & Rescue Services National Employers, the Fire Brigades Union and the National Fire Chiefs Council) supported new and additional activities for the Service. Examples of these activities are driving ambulances, training care home staff in the donning and doffing of PPE safely, assisting in the storage and dispatch of PPE, amongst others. This meant that risk assessments had to be written to capture the risks and control measures required to protect personnel.

During lockdown, staff working from home and those who were shielding were contacted regularly by their line manager to check on their welfare and reminded of the support networks available to them should they feel isolated or felt that their mental health and well-being may be at risk.

At the end of lockdown and shielding a 'Supporting staff back into the workplace' aide memoire was developed which provided the latest position on the measures implemented, adjustments necessary etc. in a bid to allay concerns and reassure staff. This was completed by both the individual and line manager.

The Government introduced 5 steps that organisations needed to have in place to be deemed 'COVID Secure'. They also introduced certificates to display once these measures were in place and embedded.

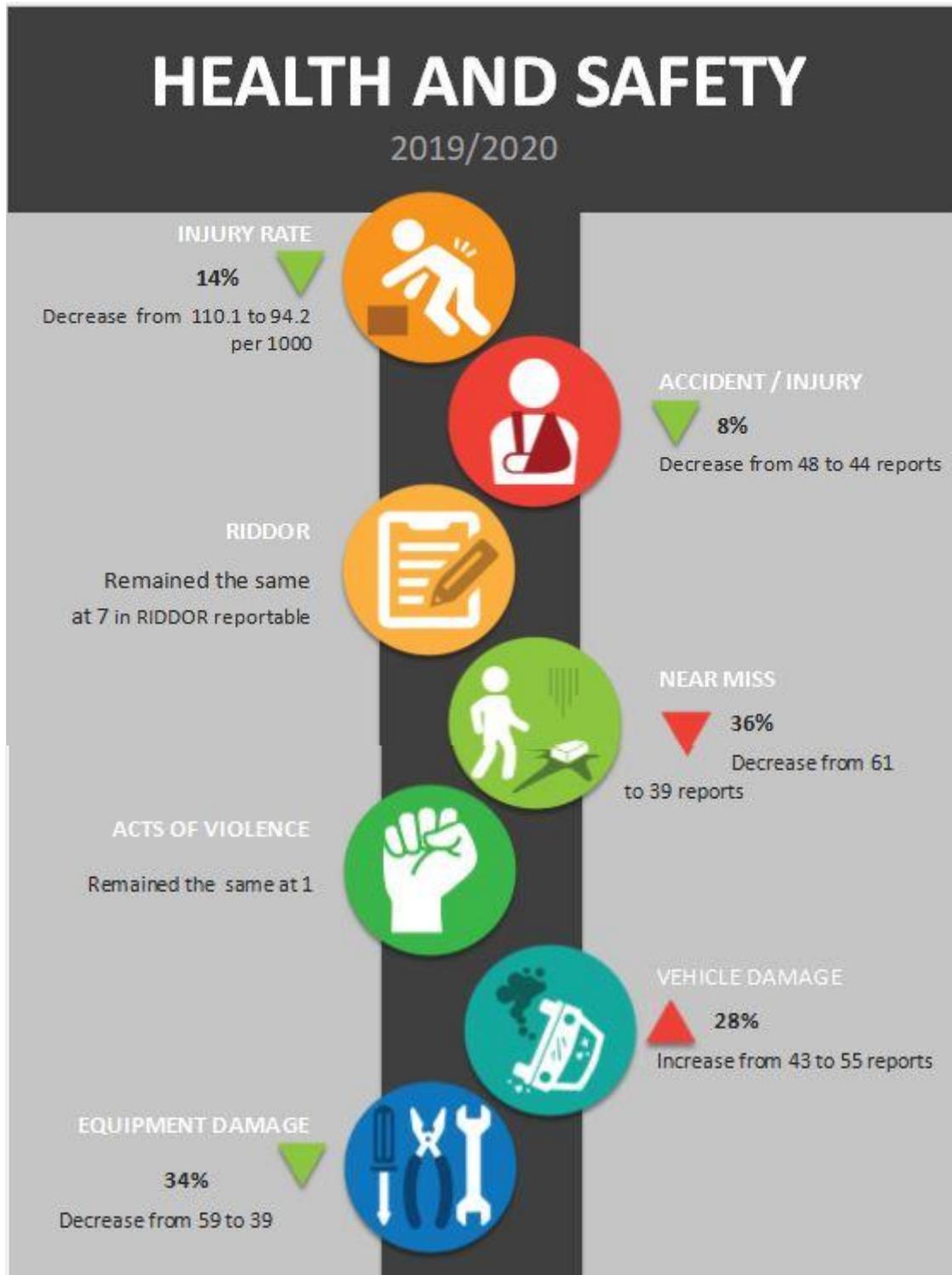
The Health and Safety department created a COVID-19 audit form and conducted a programme of spot audits across all stations and sites to identify if the measures were being implemented and adhered to. Any breaches and

findings were highlighted to the Station Commander/site manager for rectification.

It is pleasing to note that all stations and sites are now COVID Secure. To ensure ongoing compliance with the requirements, monthly inspections will be carried out by the Station Commander/site manager with the Health and Safety department conducting spot audits.

The Health and Safety Executive (HSE) have stated that, should they receive a complaint from an employee concerned about the lack of measures in place in their organisation, they will carry out an investigation. One of the processes they will be looking for is the monitoring of the ongoing compliance with the measures. To ensure this is in place in this Service, the Health and Safety department have created a monthly inspection form, an extension of the COVID-19 audit form, which is to be completed by the Station Commander/site manager and returned to the Health and Safety department. This provides evidence and an audit trail should the HSE wish to come into the Service. It also provides assurance to the Authority that the Service is doing all it can to ensure compliance.

Our performance at a glance



Performance overview

In 2019/20 the number of incidents attended was 9,073 and the number of mobilisations was 9,827. These figures do not include co-responding incidents or officer mobilisations. Overall there have been reductions in personal injury and equipment safety events, an increase in the number of vehicle safety events and the number of events that come under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) and Acts of violence have remained the same – please see *'Our performance at a glance'* on page five. The number of 'near-miss' reports has decreased this year from 61 to 39. An overview of the figures is provided below.

Personal injury: The *injury rate* is determined by calculating the number of events reported; divided by the number of employees and multiplied by 100,000 as set out by the HSE. For the year 2019/20 the *injury rate* is 94.2 per 1000 employees compared to 110.1 in 2018/19 which is a significant reduction. In terms of the actual numbers of personal injury safety events, there has been a decrease from 48 in 2018/19 to 44 in 2019/20.

The severity of a safety event is determined by multiplying the 'likelihood' of the safety event occurring again by the 'severity' of the injury sustained. The resulting figure is known as the risk factor score:

- 1 to 5 is deemed a minor event
- 6 to 12 is moderate and
- 15 to 25 is a major event

Of the 44 personal injury safety events, 33 have been recorded as minor in nature and 11 as moderate.

Six of the 11 were musculoskeletal injuries primarily sustained by the latest cohort of apprentices who were using muscle groups in different ways and were perhaps not as fit as they should have been. Two were cuts of a moderate nature and the remaining three were other separate injuries which cannot be specified due to GDPR legislation.

Serious workplace injuries, occupational diseases and specified dangerous occurrences are reportable to the HSE under RIDDOR.

The number of RIDDOR reportable events for 2019/20 is seven, the same as in 2018/19. Analysis of these events resulted in:

- One dangerous occurrence
- Six 'over 7 day' sickness absences.

Equipment damage safety events has seen a significant decrease of 34 per cent, with 39 safety events compared to 59 in 2018/19. 34 of these were of a minor nature and 5 were moderate. Analysis carried out by the Health and Safety department identified that the moderate events were isolated incidents with no trends highlighted from them. One of these, however, resulted in a 'dangerous occurrence' which was reported under the RIDDOR requirements (as stated above).

2019/20 has seen a significant increase in the number of vehicle safety events with 55 safety events compared to 43 in 2018/19. 42 were of a minor nature and 13 were moderate. Four of these were slow speed manoeuvres and three were attributable to identifying vehicle damage sometime after the damage had occurred. The Health and Safety department have issued a communication reminding all staff of the importance of carrying out pre and post use checks of vehicles and equipment and the requirement to report damage as soon as practically possible after it has occurred. The remaining six were separate safety events which, again, cannot be specified due to GDPR legislation.

In the category "Acts of violence against firefighters"; there was only one incident of note in 2019/20 which was the same for the year 2018/19. It is important to bear in mind that, whilst these are very low figures, all acts of violence against staff are taken seriously and reported to the police.

"Near-misses" (where there has been no injury or financial loss) are a vital part of risk management. Proactive reporting is key to reducing the number of safety events (reactive reporting) as an investigation can be carried out and recommendations actioned to ensure safety events of a similar type do not occur in the future.

For the year 2019/20 there has been a significant decrease in the number of "near-miss" reports of 39 compared to 61 in 2018/19. This result highlights the need to constantly remind staff to report events that may seem trivial, as there has been no injury or financial loss, in order to improve performance.

The performance statistical data received from the Home Office for 2019/20 is displayed as league tables of fire and rescue services with similar numbers of employees in order to provide a more accurate comparison of performance between BFRS and its peers. This performance relates solely to operational personnel.

There has been an increase in the **total number of persons injured** from 36 in 2018/19 to 38 in 2019/20. Of these 20 occurred at training events, 11 during routine activities and 7 at operational incidents. Wholetime firefighters have been most affected with 16 injuries. The remaining injuries affected 9 Apprentice Firefighters, 5 On-Call Firefighters, 2 Flexible Firefighters and 6 during bank shift activities.

The total number of **injuries at fires** has decreased from six in 2018/19 to five in 2019/20 resulting in BFRS remaining in the top three of the National Peer Group Performance Comparison table detailed in Appendix 1.

The total number of **injuries at special service calls** has increased from one to two, resulting in BFRS remaining top of the peer table.

In terms of **injuries during routine activities** there has been an increase of one from 10 in 2018/19 to 11 in 2019/20. This has resulted in BFRS moving from fifth position to seventh. The small number of events and increase of one in this year compared to last, has a negative impact on the position that BFRS hold in the peer table.

Injuries over 7-day absence figures have remained the same as last year at six. BFRS have retained fourth position in the peer table.

There has been an increase in the total number of **injuries during training events** from 19 in 2018/19 to 20 in 2019/20, resulting in BFRS retaining fifth position for the third year running.

Health and safety performance is reported quarterly at the Health, Safety and Well-being Committee chaired by the Deputy Chief Fire Officer. Key stakeholders, the representative bodies and the Representative of Employees are invited to attend these meetings. Governance is via the Performance and Strategic Management Boards on a six-monthly basis. The reports include statistical data on the number and type of safety events occurring at operational incidents, training and routine activities and the number and types of safety events involving Support staff.

Station Improvement Planning

As a result of the development of an 'audit style' process to ensure there is an improvement in the way station personnel perform and simultaneously provide evidence for how they are improving, a pilot has been carried out across fire stations over the past six months. This process has been through several iterations and continues to evolve but early indications are that crews have engaged in the process and the outcomes of each 'audit' carried out so far have been positive.

The aim of the process is to identify key areas which are either a risk or have been seen to be areas of weakness and test the station personnel against what the Service expects from them in these areas.

The overall objective is to see improvement through social incentives, immediate reward and progress monitoring which will be achieved through ensuring the

process is one of transparency, positivity and allowing the stations to maintain an element of control.

There is a range of subjects that will be covered in this improvement programme including health and safety. In association with the Health and Safety department, a range of health and safety matters were determined which would be discussed with station personnel to identify their level of understanding and expected behaviours. These subjects include:

- Employee health and safety responsibilities
- Personal Protective Equipment (PPE) on the incident ground
- Slow speed manoeuvring
- Non-operational risk assessments
- Hazard reporting
- COVID-19
- Dynamic Risk Assessments (DRAs) and Analytical Risk Assessments (ARAs) – Supervisory Managers only
- Safety events and 'near-miss' reporting

The Health and Safety department will be attending stations to observe how the process works with a view to conducting these 'audits' moving forwards to provide an overall consistent approach to the improvement plan.

Over a period of time all stations and watches will be visited providing an overview of how they are all performing and where there are areas of weakness.

As the final part of the process, from early 2021 there will be a greater emphasis on the robustness in challenging the behaviours and levels of understanding amongst station personnel to highlight that the Service takes this process very seriously. This will invariably mean that there will be additional work for the Health and Safety department in terms of following up on identified failures and then to challenge response on the actions taken to deal with these.

Employee Well-being

Attendance Management

The current focus of the Attendance Management Monitoring Group (AMMG) is on the structure of the group and how the Service captures and reports absence and whether there are ways this could be enhanced.

Overall, sickness absence reduced in 2019/20 for both On-Call and Wholetime staff groups when compared to 2018/19. Support staff, however, saw an increase for the year period, from 4.9 days per person in 2018/19 to 7.3 days per person in 2019/20. This was mainly due to an increase in both long and short-term sickness over the period.

The Human Resources department continue to work closely with managers to support employees back to work, this includes adherence to the Attendance Management procedure, referrals to Occupational Health, Welfare Officer and Employee Relations support, Employee Assistance Programme and a range of other initiatives relevant to each individual case.

Wholetime staff sickness levels decreased for the same period, from 10.4 days per person in 2018/19 to 8.7 per person in 2019/20.

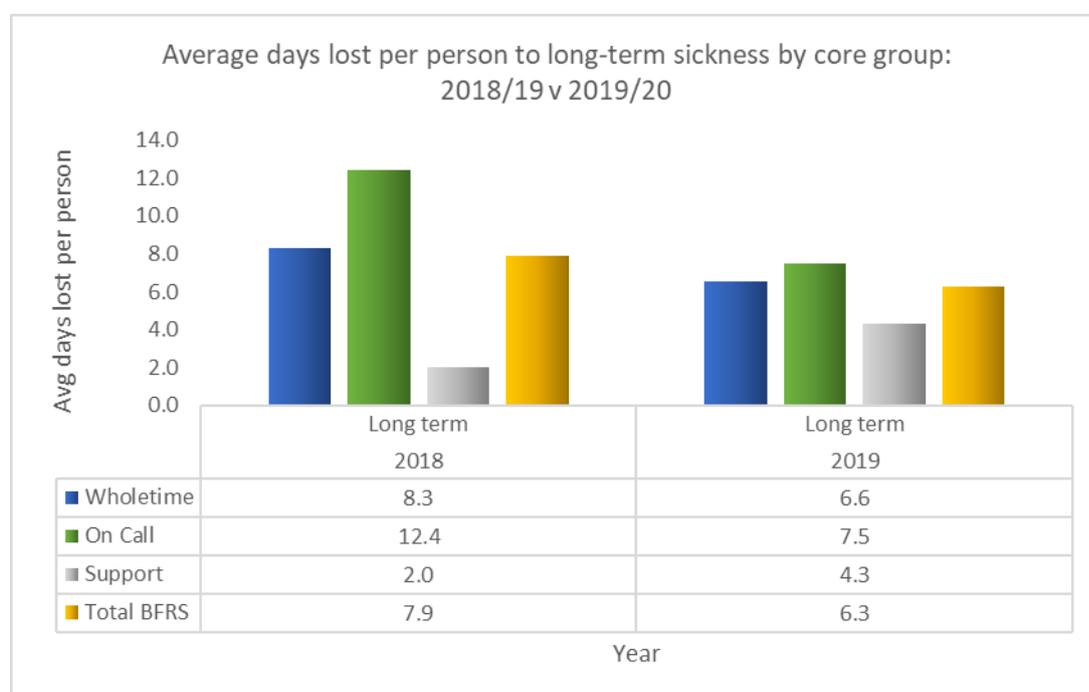
On Call staff absence levels dropped to 10.1 days lost per person, which was a decrease compared to 2018/19 where the average was 14.9 days per person.

However, considering sickness absence overall for all three staff groups, levels overall at BFRS fell by 1.6 days per person in 2019/20 to 8.7 days, compared to 10.3 days per person in 2018/19.

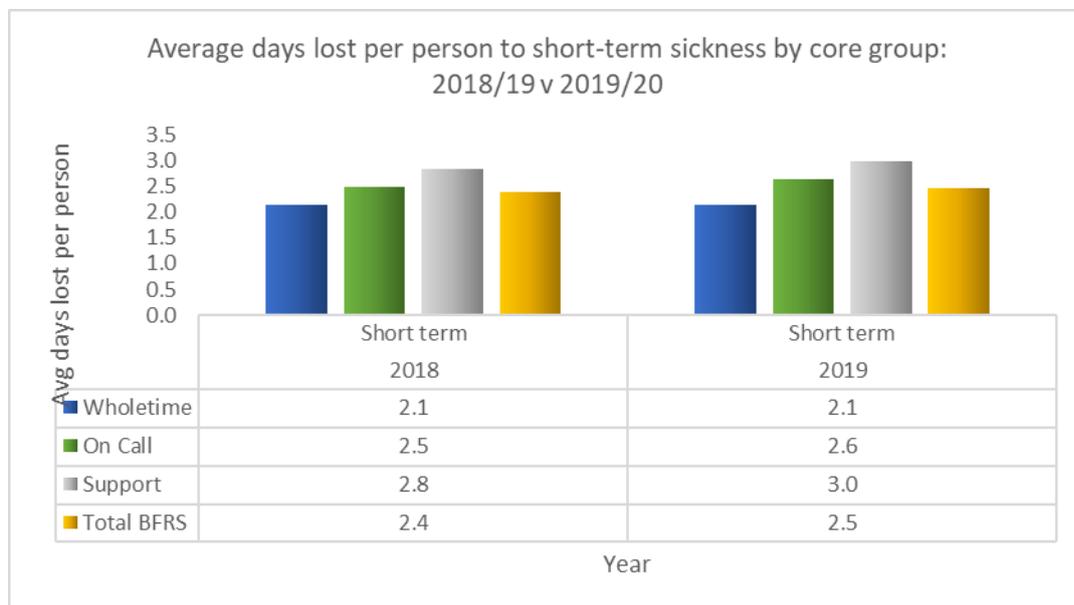
Long-term v short-term sickness absence

Long-term sickness is classed as any single period of 28 or more calendar days. All staff groups saw a decline in the number of days per person lost to long-term sickness in 2019/20 in comparison to 2018/19, with the exception of Support staff.

Please see graphs below.



Days lost to short-term sickness remained the same as in 2018/19 for Wholetime staff, or saw a minor increase for the other staff groups, and BFRS as a total.



The following table outlines the fact that musculoskeletal was the top sickness reason for all groups in 2019/20, with stress, second across the board.

Top 3 sickness reasons	Wholetime	Support	On Call	BFRS total
1	Musculo Skeletal (72.8%)	Musculo Skeletal (37.4%)	Musculo Skeletal (53.2%)	Musculo Skeletal (60%)
2	Stress (9.6%)	Stress (28.5%)	Stress (9.9%)	Stress (13.5%)
3	Minor illness (4.8%)	Minor illness (10.7%)	Hospital/ Post-Operative (8.4%)	Minor illness (5.1%)

The percentage in each group's column for each of the top three reasons is a percentage of the total sickness absence for each group. E.g. Musculoskeletal accounts for 72.8% of all Wholetime, 37.4% of all Support staff and 53.2% of all On-call sickness absence.

The BFRS total column identifies that Musculoskeletal accounts for 60% of all sickness absence across the organisation, stress 13.5% and minor illnesses (colds, flu, viral infections) 5.1%.

Whilst stress is relatively low in comparison it needs to be monitored closely, particularly as it is the second top sickness reason across all groups and for the organisation as a whole.

The Well-being group is actively considering why this may be happening and looking at how the Service can work proactively to reduce the likelihood of stress occurring in the workplace rather than simply react to cases. This is a wider piece of work involving many stakeholders. Progress will be reported on regularly through the appropriate governance board.

According to our Occupational Health providers, musculoskeletal accounted for 55% of referrals in 2019/20. Mental health was second with 10% and injury/fracture third with 8%.

The current Employee Assistance Programme (EAP), which forms part of the Occupational Health contract, commenced on 1st April 2019. In 2019/20 the annualised utilisation for BFRS was 10.9% calculated as counselling and advice calls against the employee headcount.

Counselling calls make up 98.3% of all calls received. Depression was the most common reason, accounting for 22% of the overall counselling engagement.

The online portal received a total of 112 hits within this reporting period. However, there were no online counselling consultations during the reporting period.

There were 13 referrals resulting in face-to-face consultations which equated to 62 sessions. Four referrals were on a telephone counselling basis with 13 sessions delivered.

All employees within the Service have a role to play in minimising and managing stress.

Employees are encouraged to seek assistance from their line manager or others as appropriate if they are or potentially could be suffering from stress. If an individual has any concerns about a colleague who they feel may be suffering or are likely to be suffering from stress they raise these with their line manager, or appropriate alternative such as the Welfare Officer.

When a manager identifies that an employee is suffering from stress, they meet with the individual and complete an individual stress audit, as per the Service's Stress in the Workplace procedure. Where it is not possible or appropriate for

the manager to undertake the stress audit, Human Resources, the Welfare Officer or Occupational Health will undertake the audit.

Where an employee has been away from work for any period of time as a result of any stress related factors, a return to work stress audit will be completed to ensure that the necessary adjustments have been made to reduce the individual's stress. Providing employees with a clear understanding of what the return to work will entail will go a long way towards alleviating any potential anxiety before returning back to work following a period of absence. A telephone call/meeting with a member of Human Resources /Welfare Officer or the line manager to discuss important details about the return and potential impacts on work performance or team can be extremely helpful.

To aid with the employee's reintegration into the workplace to ensure a smooth transition, a Wellness Action Plan should be completed. This details any support mechanisms required to maintain their health at work. The Wellness Action Plan is designed to mitigate, reduce or remove the individual's stress.

If an individual has any concerns about someone they can bring this to the attention of Human Resources, the Welfare Officer, or Mental Health Champions or Mental Health First Aiders in order to promote assistance and intervention as necessary.

Human Resources provides support to employees via Occupational Health, the Employee Assistance Programme (EAP) and the Welfare Support Officer, providing guidance and assistance for both managers and individuals when dealing with stress and psychological health issues.

Occupational Health provide specialist advice to employees and will refer to specialist counsellors or agencies as required.

The Employee Assistance Programme – via Health Assured, a free, confidential service available online or by phone, which offers expert advice, information and support to employees 24 hours a day, seven days a week. In addition, Health Assured publish monthly newsletters, a health and well-being mobile app which offers a range of well-being tools and features, designed to improve the users' mental and physical health by using personal metrics to set goals and achievements.

The Trauma Support team will support employees exposed to traumatic stress through specific incidents, this is to provide some normalisation and an opportunity to talk about the traumatic event they have recently experienced.

Blue Light Hub

The Health and Safety Manager has been actively involved in the Blue Light Hub project, offering advice on the health and safety legislative requirements for fitting out the building to ensure compliance.

Landlord responsibilities for two partner agencies sharing the Blue Light Hub, South Central Ambulance (SCAS) and Thames Valley Police (TVP), is a new role for the Service. Work has been ongoing to ensure that risk assessments, including Control of Substances Hazardous to Health 2004 (COSHH), general and fire risk assessments are in place and have been shared. SCAS have taken up residency and TVP are due to move in imminently.

Fire Wardens for all three Services have been trained including how to operate the simple evacuation system which is used in the event of an evacuation, whether in an emergency or as part of a drill.

The system (known as TagEvac) is based on identifying zones within the building. In each zone a 'tag' is located in a sealed perspex box. On activation of the alarm the relevant fire warden will 'sweep' their allocated zone and ensure everyone has left the area before utilising the tensile 'do not enter' barriers and breaking the seal and removing the 'tag'. The fire warden will then take the 'tag' to the Fire Incident Controller at the muster point, who will insert it into the zone board. This provides a clear visual indicator of all areas cleared and any that may not have been which will assist the attending fire crew.



Management of risk

Air monitoring – In 2012 the World Health Organisation designated diesel as a group 1 carcinogen. Whilst the frontline appliances are *Euro 6* category for diesel emissions some of the older On-call appliances are not. It was highlighted during the annual Health and Safety audit in 2019 that soot residue was present on the kit room walls at Beaconsfield fire station. As a result, the Service commissioned Bureau Veritas to conduct air monitoring for diesel fumes. This monitoring took place over a three-month period - 24 hours a day, 7 days a week in order to provide robust data which would inform the outcomes and subsequent report.

The conclusion reached by Bureau Veritas was *“whilst there are spikes in the PM10 concentrations measured at the fire station, these typically only last 5 or 10 minutes, and so the concentrations never exceed those of concerns for either the Air Quality Limit or the Workplace Exposure Limit. As such, there is no proven risk to health.*

That said, we make the following recommendations in order to limit the PM10 concentrations that personnel are exposed to:

- *Replace or repair the plastic door between the Appliance Bay and the Muster Bay in order to prevent particulates from the Appliance Bay entering the Muster Bay;*
- *When vehicle engines are on, the Appliance Bay door should be open and the plastic door to the Muster Bay should be shut;*
- *The old Volvo without the catalytic convertor should only be started if all other vehicles are unavailable. If this vehicle is parked in the bay furthest from the Muster Bay, then this will limit the potential for particulates to enter the muster bay;*
- *To investigate whether the old Volvo without the catalytic convertor can have a catalytic convertor installed”.*

Protecting Firefighters against contaminants – Whilst there is no case law or confirmed evidence that the products of combustion from a fire lead to an increased risk of cancer in firefighters in the UK, it is recognised that this is a risk which needs to be mitigated so far as is reasonably practicable.

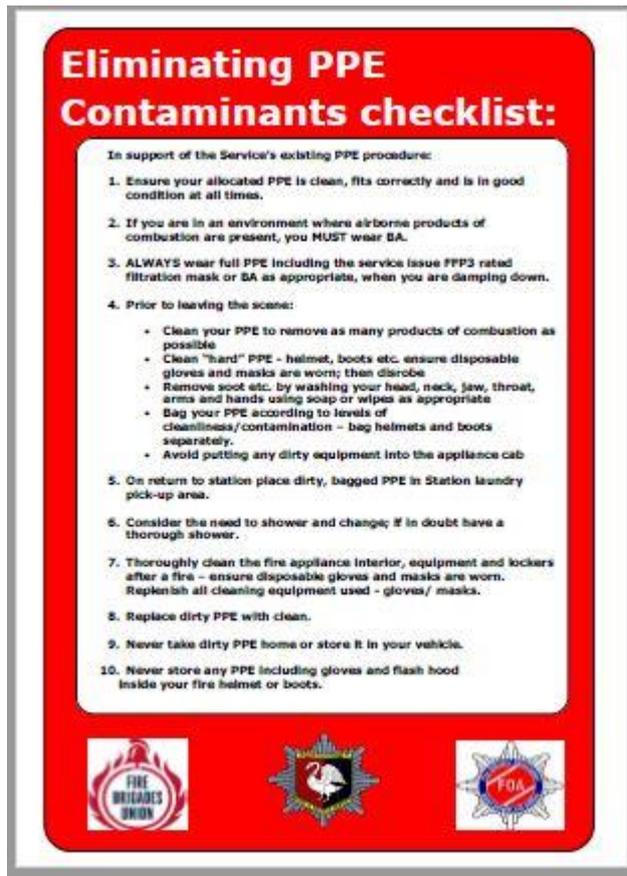
The NFCC set up a project to monitor the effects of contamination through medical surveillance and to determine what measures nationally could be adopted to reduce the potential risk posed. Due to COVID-19 this work has had to be temporarily suspended.

The Fire Brigades Union (FBU) also commenced a contaminants project, in conjunction with Professor Anna Stec from the University of Central Lancashire, which involves the analysis of blood, urine and hair to determine if and at what level contaminants are present. Unfortunately, this project, too, has been temporarily suspended.

Locally, the Service has introduced a range of measures to protect firefighters against the risk of contamination which include:

- PPE and 'Clean cab/vehicle' procedure;
- 'Clean' and 'dirty' areas on stations to limit where PPE can be worn
- Blue Light Hub – designed to 'flow' from 'dirty' to 'clean' areas and a lecture room capability in the appliance bay which removes the requirement to remove PPE before attending a lecture;
- A robust process for dealing with contaminated PPE including boots, helmets and gloves;
- Issuing of 'wipes' which will remove contaminants from exposed skin on all appliances and stations;
- Provision of washing machines on all stations for washing working rig and bedding etc. so there is no risk of cross contamination;
- 'Eliminate contaminants' checklist prominently displayed in main areas of fire stations as a reminder to crews of the actions they need to take – please see example below.

This checklist was developed and agreed by the Service, the Fire Brigades Union (FBU) and The Fire Officers Association (FOA).



Michelin Wheely Safe

A recommendation from the independent investigation into the major 'near miss', involving a wheel coming off an appliance whilst returning to station, was to procure and fit a safety device to prevent the wheel nuts from working loose undetected. After research, it was decided to procure the Michelin 'Wheely Safe' and conduct a trial - see image below.



The trial was successful and these devices have been fitted to all Scania appliances. Discussions have been held with the appliance builder regarding the possibility of integrating the 'Wheely Safe' system into the new build Volvos and retrofitting existing appliances. COVID-19 has meant that this work has been halted due to the temporary closure of the appliance build factory.

Analytical Risk Assessment (ARA) Training Package

A key component in managing risk on the incident ground is the analytical risk assessment. Its purpose is to identify the significant hazards, who may be affected and what control measures need to be implemented to eliminate or control those hazards.

The Incident Commander uses these findings to determine the tactical plan for managing the incident and the tactical mode to be used e.g. *Offensive* (where crews are committed to a burning building to fight the fire) or *Defensive* (where crews are not committed and firefighting takes place outside of the building).

Through 'operational learning' from incidents and the audit of ARAs by the Health and Safety department it is recognised that there is confusion amongst some operational crews as to the purpose and importance of these risk assessments.

To remove that confusion and to clarify the process, the Health and Safety department have written an ARA training package which is to be rolled out, by both the Operational Assurance and Health and Safety departments, to all operational personnel.

Discussions are underway between the Health and Safety department and the People Systems and Learning Design Manager to build an interactive virtual training package which will provide crews with an evolving incident scenario for which they must identify the significant hazards, who will be affected and what control measures are required to eliminate or control those hazards and subsequently be able to create a robust and effective ARA.

Working with others

Internally

During 2019/20, the Health and Safety department assisted the Procurement and Property departments with the procurement and issue of new office chairs across the Service. The assistance provided was advice and guidance on the ergonomic considerations and compliance with the Display Screen Equipment Regulations 1992 (DSE).

Several different types of chairs were trialled by headquarters staff with the most popular purchased. Guidance was issued to staff on how to adjust them to suit their preferred seating position.

Externally

South East region Fire and Rescue Services – The Health and Safety Manager chairs the South East region Health and Safety Committee which meets quarterly to discuss a range of standing agenda items such as COVID-19, national, regional and local learning, significant safety events and new and updated legislation as well as relevant matters that may arise during the year. The Health and Safety Manager also sits on the NFCC national Health and Safety Committee which provides the Service with a holistic picture of health and safety nationally.

Fire and Rescue Risk Group (FARRG)

As the Service is a member of the Fire and Rescue Indemnity Company (FRIC) the Health and Safety department, along with the insurance officer, sit on this group and are instrumental in developing 'good practice' in terms of risk management. Examples of the work carried out by the group is the development of processes to reduce the risk of claims in terms of stress in the workplace and driving for work, amongst others.

Thames Valley Health and Safety collaboration opportunity

After initial discussions, it has been decided that this project will be placed on the 'back burner' for the time being. The COVID-19 pandemic is impacting on various workstreams across the fire service nationally.

Health and Safety training

Once again, the Training Strategy Group approved funding of £25,000 for Health and Safety training requirements for this financial year. Of those requirements, the following training courses took place:

External providers

It was necessary again this year to run two **Institute of Occupational Safety and Health (IOSH) Managing Safely** courses. These courses took place in January and February 2020. The delegates consisted of both Operational and Support staff who had recently been successful at the Supervisory Manager assessment centre or had recently been promoted to Crew Commander or Support staff equivalent.

This year saw a reduction in the number of **National Examination Board in Occupational Safety and Health (NEBOSH) General Certificate** courses to one, as the Service now has only a handful of new Station Commanders and Support staff equivalents. The course provides the necessary skills to enable these staff groups to conduct health and safety audits/inspections and to manage stations/sites and people from a health and safety perspective. The course was run in-house in October 2019 where five places were sold to Oxfordshire Fire and Rescue Service.

Fire Risk Assessor training took place in February 2020 for Station Commanders and site managers in charge of stations/sites and, who are deemed to be the 'responsible person' under the Regulatory Reform (Fire Safety) Order 2005.

A gap had been identified during local Fire Safety audits on authority sites which highlighted that the 'responsible persons' had not received training in creating fire risk assessments and as a result a four-day training course, delivered by the British Standards Institute, was undertaken.

The fire risk assessment template was evaluated, updated and implemented as a trial for the 2020 assessments.

This year it was necessary to run a **First Aid at Work** course for Support staff in preparation for occupancy of the Blue Light Hub and to renew qualifications that had expired.

A **Fire Warden** course was provided for personnel who would be working at the Blue Light Hub prior to the Service taking up occupancy. Personnel from TVP and SCAS have been identified and have now completed their Fire Warden training prior to them taking up residency.

Performance indicators

Budgets

The health and safety budget for the year 2019/20 resulted in an underspend of just under £9K as a result of savings/underspends in printing and stationery, courses and conferences fees and subscriptions to national bodies. These underspends have been taken into account in the zero-based budgeting for the financial year 2020/21.

Health and Safety key performance indicators – 2020/21

Please see below the health and safety objectives set in line with the Authority's Public Safety Plan 2020-2025 for this year:

1. Implement and embed the next stages of the Health and Safety strategy – apply for a RoSPA Occupational Health and Safety Award and conduct a further Behavioural Safety Culture Survey;
2. Ensure working hours in Fire Service Rota* are monitored and breaches of the Working Time Regulations are highlighted and actioned;
3. Devise and implement an action plan in preparation for the next HMI inspection;
4. Work with Human Resources and the occupational health provider to set up a programme of medicals and surveillance for Workshops personnel;

*Fire Service Rota (FSR) is the electronic resource management system used to track, manage and allocate staff resources.

Appendix

National peer group performance comparison tables 2018/19 and 2019/20

The Health and Safety department is required to report on BFRS end of year accident statistical returns to the Home Office on 31 May 2020 for the period 1 April 2019 to 31 March 2020.

Summary:

The Health and Safety department provided returns for:

HS1 - injuries during operational incidents, encompassing both Wholetime and On-Call employees and sub-divided into injuries at fires, at road traffic collisions and at other Special Service calls.

HS2 - injuries during training and routine activities also encompassing Wholetime and On-Call employees and sub-divided into injuries during operational training, fitness training and routine activities.

Findings:

HS1 – The year 2019/20 has seen a small increase in the number of personnel injured at operational incidents from 36 to 38. The peer group has seen both increases and decreases in the number of injuries which differs from the previous year where there were significant increases across the board.

Outcome: In the national peer group league tables for *total number of injuries*, BFRS has moved from third position in 2018/19 to fifth in 2019/20. For injuries sustained at fires BFRS has moved from the top of the table to third position and for injuries sustained at special service calls BFRS retains the top position.

HS2- Injuries at training events have seen an increase of one from 19 in 2018/19 to 20 in 2019/20. Injuries sustained during routine activities has seen an increase of one from 10 in 2018/19 to 11 in 2019/20.

Outcome: BFRS's position in the peer group table for injuries at training events has moved from fifth place to sixth and for injuries during routine activities, BFRS has remained at seventh position.

Overall, of the seven categories, the number of injuries sustained to firefighters has increased by one in four categories; remained the same in two and decreased by one in the remaining category.

Below are the national league tables which provide a visual view of the overall safety performance of BFRS in the operational arena compared to their peer group. A detailed explanation of performance can be found in the Performance Overview section of the report on page six.

Total number of persons injured	2018-19	2019-20
Suffolk	28	27
West Sussex	38	28
Northamptonshire	50	29
Warwickshire	29	29
Bedfordshire	53	37
Buckinghamshire	36	38
Oxfordshire	39	47
Berkshire	56	60
Hereford and Worcester	71	62
East Sussex	66	65
Cambridgeshire	122	82
Norfolk	60	86

Total number of injuries at fires	2018-19	2019-20
Bedfordshire	9	2
Warwickshire	7	4
Berkshire	24	4
Buckinghamshire	6	5
West Sussex	15	5
Suffolk	7	6
Northamptonshire	13	7
Oxfordshire	7	11
Hereford and Worcester	10	12
East Sussex	16	19
Norfolk	17	19
Cambridgeshire	73	34

Total number of injuries during routine activities	2018-19	2019-20
Bedfordshire	10	4
Suffolk	3	5
West Sussex	2	5
East Sussex	12	7
Northamptonshire	13	7
Warwickshire	4	8
Oxfordshire	3	9
Berkshire	12	10
Hereford and Worcester	8	10
Buckinghamshire	10	11
Cambridgeshire	15	14
Norfolk	4	24

Total number of over 7-day injuries	2018-19	2019-20
West Sussex	7	1
Berkshire	6	2
Warwickshire	2	2
Northamptonshire	5	3
Suffolk	3	3
Buckinghamshire	6	6
Oxfordshire	3	6
Bedfordshire	5	7
Cambridgeshire	5	8
Hereford and Worcester	9	8
East Sussex	5	10
Norfolk	10	12

Total number of major injuries	2018-19	2019-20
Buckinghamshire	0	0
Berkshire	1	0
Norfolk	0	0
Suffolk	0	0
Warwickshire	0	0
East Sussex	1	0
West Sussex	1	0
Cambridgeshire	2	0
Oxfordshire	2	0
Bedfordshire	1	1
Hereford and Worcester	1	2
Northamptonshire	1	3

Total number of injuries during training	2018-19	2019-20
Northamptonshire	20	12
West Sussex	15	12
Cambridgeshire	19	13
Suffolk	13	14
Warwickshire	10	14
East Sussex	19	19
Buckinghamshire	19	20
Bedfordshire	27	20
Oxfordshire	22	20
Norfolk	26	31
Hereford and Worcester	51	31
Berkshire	18	38

Total number of injuries at Special Services	2018-19	2019-20
Buckinghamshire	1	2
Suffolk	5	2
Northamptonshire	4	3
Warwickshire	4	3
West Sussex	6	6
Oxfordshire	7	7
Berkshire	2	8
Hereford and Worcester	2	9
Bedfordshire	7	11
Norfolk	13	12
East Sussex	19	20
Cambridgeshire	15	21

