



# Health and Safety Service Plan

2019 - 2021

Effective date of Strategy:	1 <sup>st</sup> April 2019
Executive approval date:	4 <sup>th</sup> February 2019
Full Council approval date:	20 <sup>th</sup> February 2019
Review date:	1 <sup>st</sup> April 2021
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## **INTRODUCTION**

This Service Plan sets out how North Devon Council intends to provide an effective health and safety service that meets the requirements of Section 18 of the Health and Safety at Work etc. Act 1974, (HASWA), under which there is a mandatory requirement to submit a service plan to relevant Member forum for approval to ensure local transparency and accountability. On approval the “Plan” will be published in the public arena via the Council's website.

## **1. SERVICE AIMS AND OBJECTIVES**

### **1.1 Aims**

1. The Health and Safety Service Plan is an expression of the Councils' continuing commitment to the Health and Safety Service. It covers the key areas of Health and Safety enforcement and the relevant management arrangements and objectives against which North Devon Council will monitor service delivery.
2. The Plan has been compiled in accordance with the guidance issued by the Health and Safety Executive (HSE) under the Health and Safety Executive National Local Authority Enforcement Code.
3. To protect the health, welfare and safety of workers by working with employers and others to ensure that risks in the workplace are managed properly and to achieve compliance with the HSWA and Regulations made there under.
4. To provide a health and safety regulatory service that supports local business and embraces targeted interventions, proportionality, consistency, transparency and accountability.
5. To deliver the health and safety service in full compliance with the Health and Safety Executive National Local Authority Enforcement Code.

### **1.2 Objectives**

1. To achieve a consistent and risk-based enforcement approach.
2. To ensure the safety of employees, members of the public and others who may be affected by a work activity.
3. To achieve >90% compliance with the Council's service standards for efficiency in dealing with requests for service.
4. To maximise opportunities for full cost recovery. For example charging for Primary Authority Partnership work and introducing charging for advisory visits.
5. To provide support and encourage growth of local businesses.
6. To work in partnership with the HSE and other LAs to allow better use of resources.

### 1.2.3 Links to National and Regional Priorities and Corporate Aims and Objectives

<p><b>National priorities</b> Health and Safety Executive</p> <p>Devon Health &amp; Wellbeing Board JSNA Devon Overview 2018 Public Health Outcomes Framework for England National and regional priorities 2018 North Devon Health Profile for 2018</p>	<p>Reducing the burden on businesses, save public money and properly protect citizens and communities Focus interventions and action on persistent non-compliance and give credit for business effort in maintaining high standards.</p> <p>“Significantly Worse”, (than national average):</p> <ul style="list-style-type: none"> <li>• Killed and seriously injured on roads</li> <li>• Hospital stays for self-harm</li> <li>• Dementia diagnoses (aged 65+)</li> <li>• Alcohol related harm hospital stays</li> <li>• Deprivation score</li> <li>• Smoking prevalence in routine and manual occupations.</li> <li>• Admission episodes for intentional self-poisoning by and exposure to alcohol condition</li> <li>• Admission episodes for mental an behavioural disorders due to alcohol</li> <li>• People reporting at least two long term conditions, at least one of which is musculo-skeletal related.</li> </ul>
<p><b>Corporate Priorities</b></p>	<p><b>Organisational Transformation</b></p> <ul style="list-style-type: none"> <li>• To develop a robust and flexible organisation</li> <li>• Determine our own future/destiny</li> <li>• Maintain or improve our services by flexing council structures and activities delivering resilience in the short to medium term</li> </ul> <p><b>Growing North Devon</b></p> <ul style="list-style-type: none"> <li>• To create and protect a resilient North Devon</li> <li>• Promote Barnstaple and its uniqueness as the sub-regional centre for growth but consider all opportunities</li> <li>• Use the increase in the local tax base from predicted housing and/or businesses to deliver resilience</li> <li>• Support and develop low carbon opportunities including the tidal demonstration zone</li> </ul>

## 2. BACKGROUND INFORMATION

### 2.1 Profile of the Local Authority

North Devon Council covers an area of 1,086 km<sup>2</sup> with a population of 93,976. The area is coastal and rural with the major populations found in Barnstaple (31,616), and the villages and towns of Ilfracombe (11,184), Braunton (7,353), South Molton, (5,108) Fremington, (4,310), Lynton and Lynmouth (1,441) (Census 2011)

2.1.2 The Local Authority's Health and Safety Service is delivered from Brynsworthy Environment Centre and The Ilfracombe Centre, 44 High Street, Ilfracombe EX34 9QB, with an officer presence in both locations.

2.1.3 North Devon has 4,939 businesses that come under the council's health and safety enforcement. These range in type but are predominantly retail, catering and the service sectors. As a large number of the businesses are in the food sector, there is opportunity for officers in the Food, Health & Safety Team to carry out health and safety interventions whilst carrying out their programmed food hygiene inspections. Not all workplaces fall to the Local Authority for enforcement, for example Factories, Nursing Homes, Building sites and Haulage businesses will be the responsibility of the HSE. The profile of the businesses is shown in the graph (Fig 1) below.

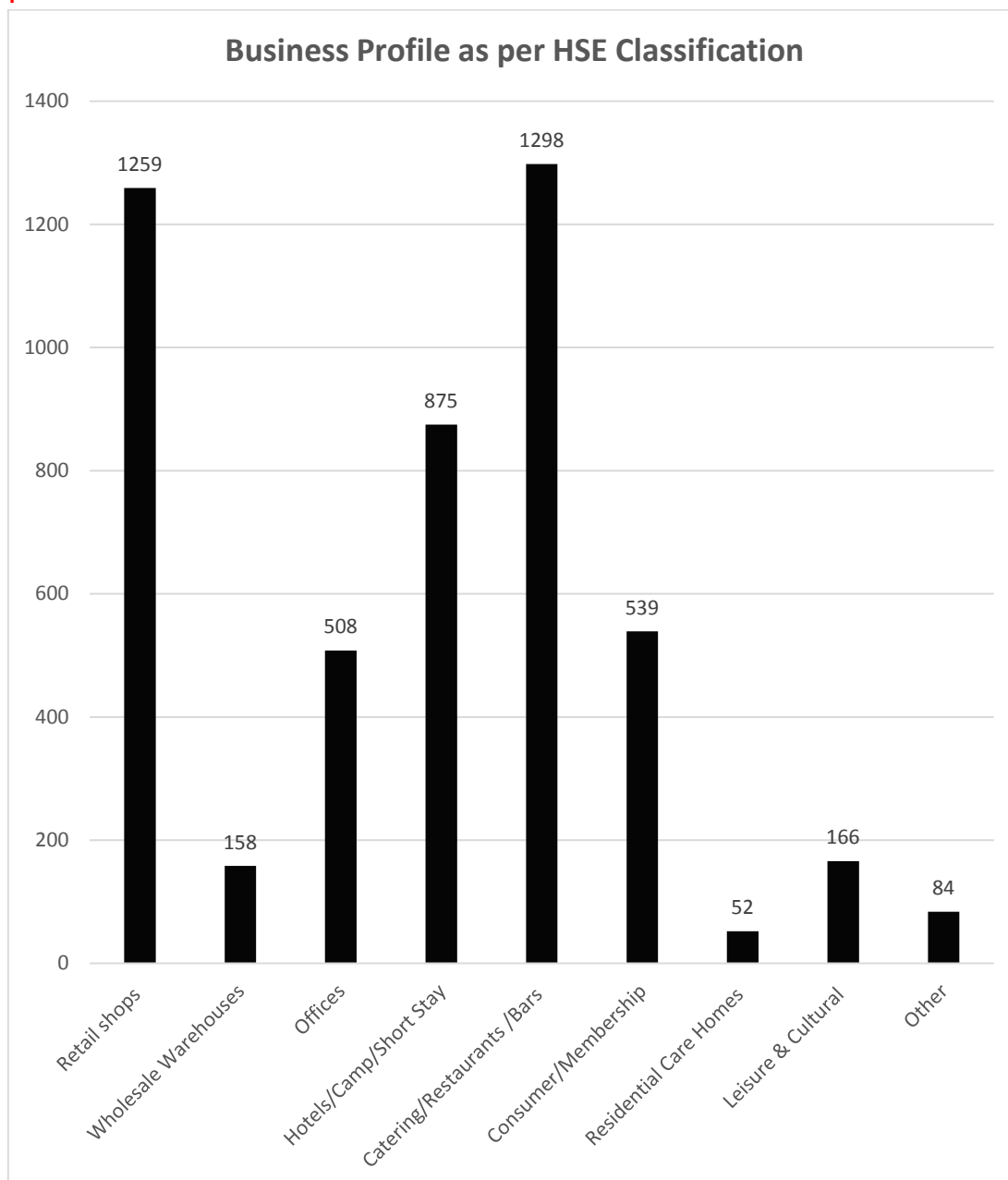
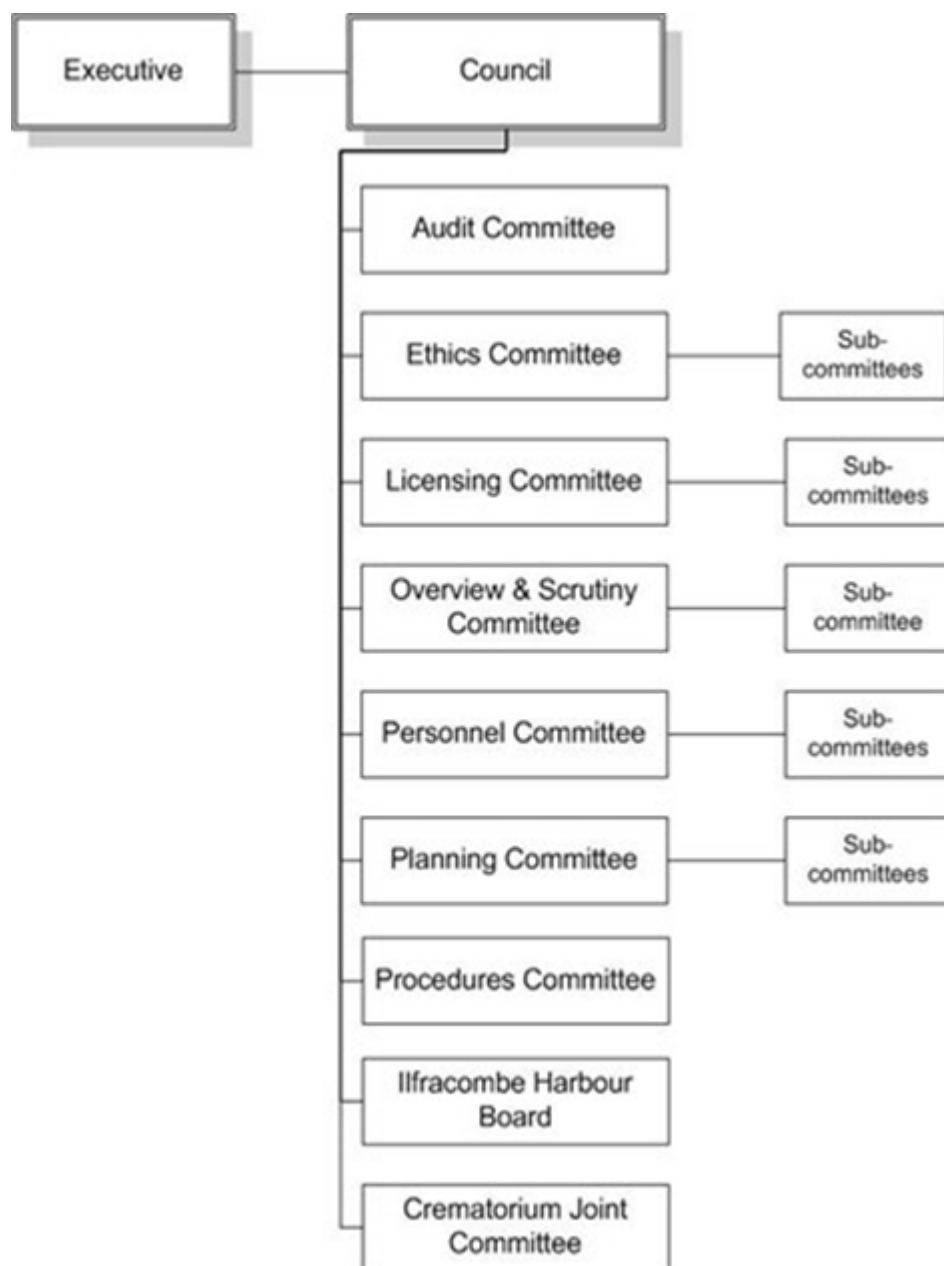


Fig 1.

## 2.2 Organisational Structure.

### 2.2.1 Committee Structure



## **2.2.2 Council Structure**

**CHART TO BE INCLUDED WHEN UPDATED VERSION AVAILABLE**

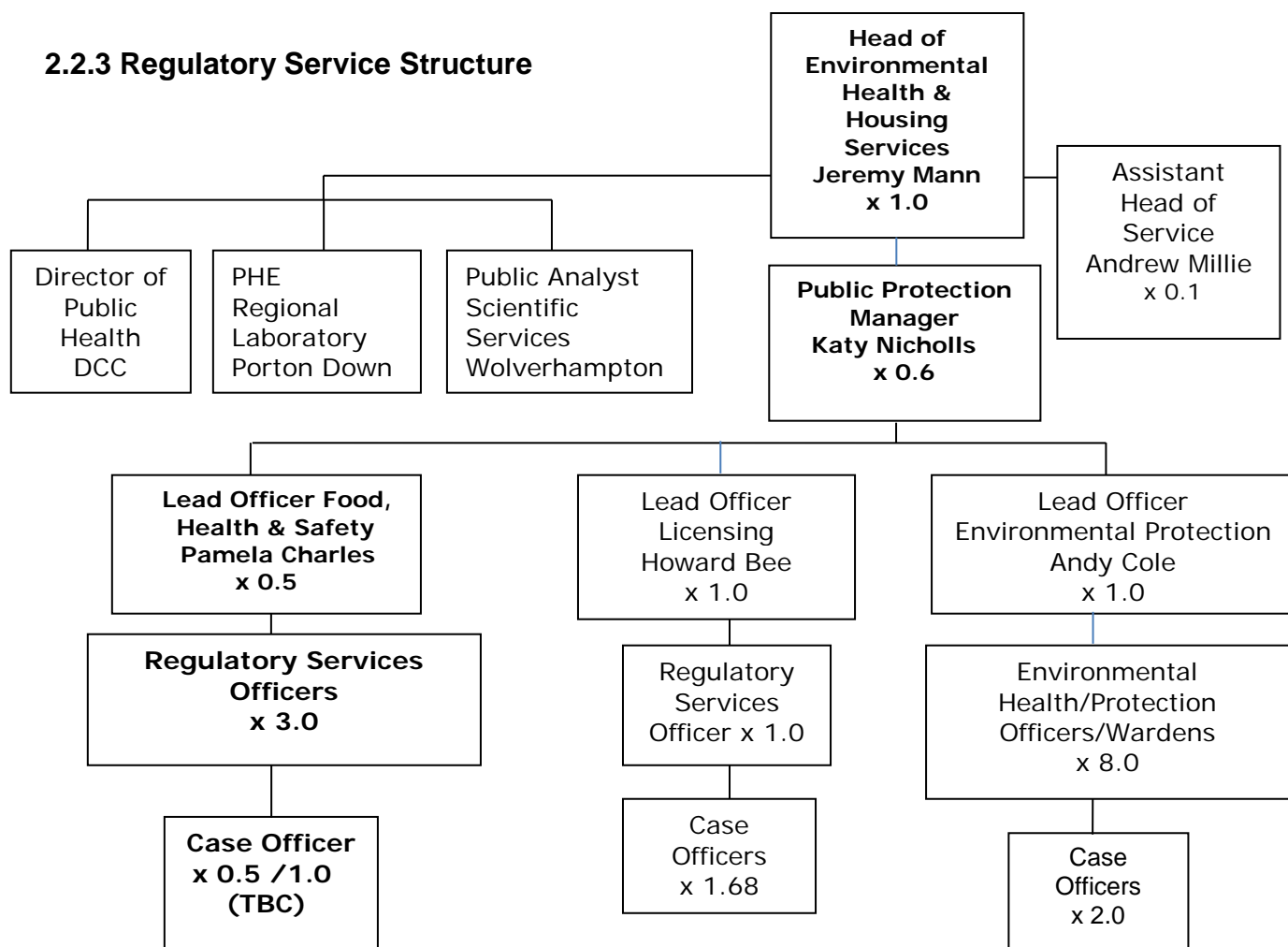
### **CHIEF EXECUTIVE- Mike Mansell**

- Head of Resources- Jon Triggs
- Head of Corporate and Community- Ken Miles
- Head of Environmental Health and Housing Services- Jeremy Mann
- Head of Operational Services- Ricky McCormack
  - Bereavement
  - Parking
- Head of Place -Mike Tichford
  - Economic Development
  - Strategic Development and Planning

### **Also Manages:**

- Building Control- Mike Tucker
- Elections- Judith Dark
- Harbour- Georgina Carlo-Paat
- Human Resources- Nikki Gordon
- ICT-Nina Lake

## 2.2.3 Regulatory Service Structure



The above structure is indicative of those staff employed by the Council as full time equivalents and not the amount of time spent on health and safety. See paragraph 2.2.5 and 4.2 for time allocated to the Council's health and safety function.

2.2.4 The Food, Health & Safety Team comprises of a Lead Officer (0.5 FTE), Regulatory Services Officers /Environmental Health Officers (3.0 FTE) and a Case Officer (vacant/temp cover 0.5/1.0 FTE- to be confirmed)

2.2.5 All officers in the Food, Health and Safety Team have duties beyond those they carry out for Health and Safety as they primarily carry out Food Safety work, therefore they only spend a small proportion of their time carrying out health and safety functions. Until 2017/18 the team had a 0.6 FTE Health and Safety Officer, who carried out all health and safety work for the team. When the officer retired, the post was removed and all the health and safety duties were divided between two enforcement officers and the Lead Officer. The team also included a Graduate EHO who was completing her training, and became fully qualified in 2018/19, who now also takes a share of the health & safety work.

2.2.6 All team Officers are contactable out of hours, by one of the designated Silver Control Officers, if deemed necessary to assist with an emergency or major incident, such as a fatality.



### **2.3. Scope of the Health and Safety Service**

2.3.1 The service is a statutory regulatory service enforcing the provisions of the HSWA and associated regulations. Health and Safety law clearly sets out that the primary responsibility for managing risk to workers and the public who might be affected by work activity lies with the business or organisation that creates the risk in the first place. Whilst the duty to comply with the legislation rests with the employer, the Council has the role of regulator. The Food, Health and Safety team provides a regulatory service to support, encourage, advise and where necessary hold to account businesses to ensure that they effectively manage the occupational health and safety risks they create.

2.3.2 Local Authority Enforcement activity is confined to the "commercial sector" and the HSE enforces the law where the principle activity of the business is manufacturing, production, transport, construction or agriculture. The HSE is also the enforcing authority for Council-owned premises.

2.3.3 The service may be split into two broad areas – Proactive and Reactive.

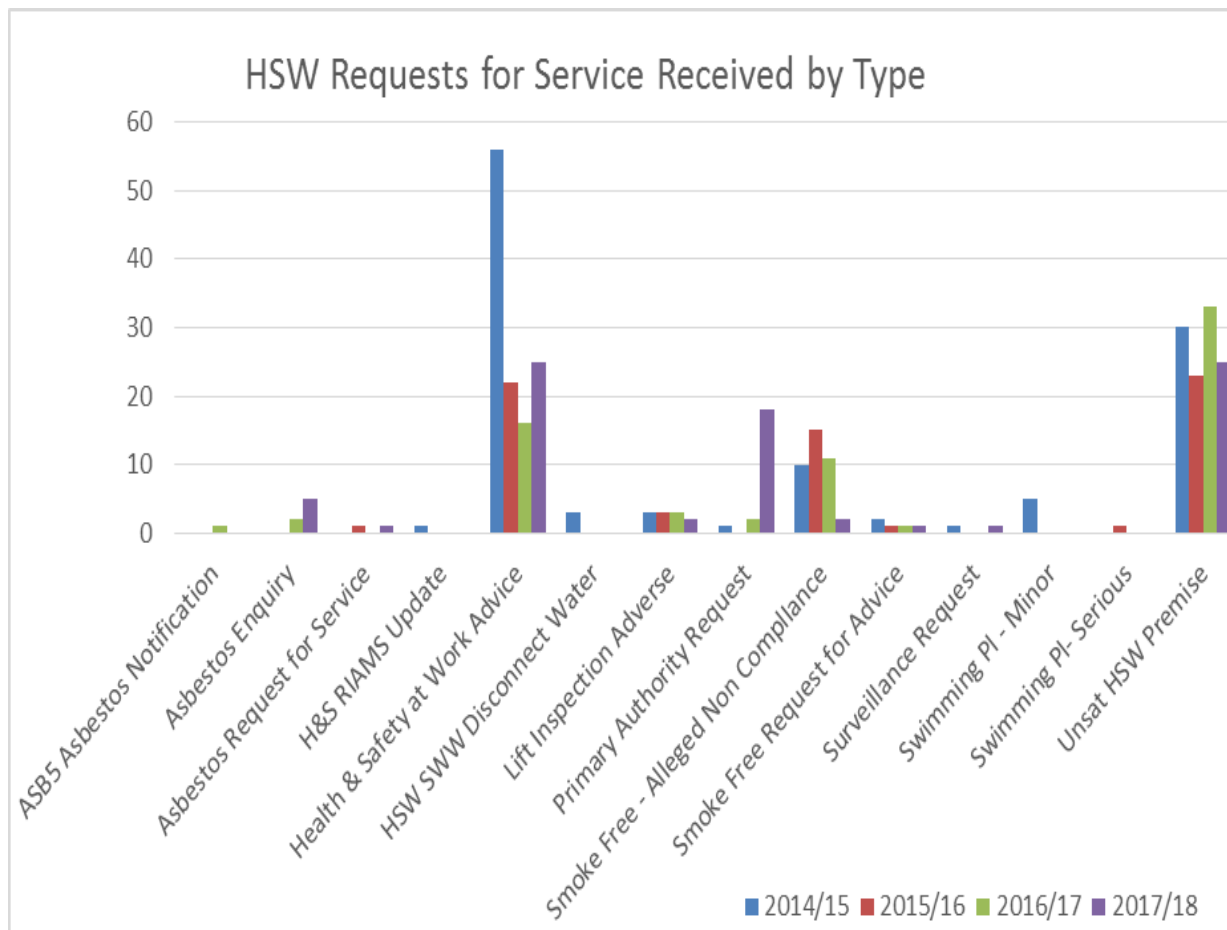
Proactive work:

- Carrying out Inspections and revisits of workplaces
- Law Enforcement – e.g. Improvement /Prohibition Notices
- Prosecutions, simple cautions and other enforcement actions
- Projects around specific high risk issues
- Providing advice to businesses
- Servicing Primary Authority Partnerships
- Education of employers- e.g. Newsletter
- Maintenance of a database of businesses for which Council has enforcement responsibility
- Maintaining a Cooling Tower Register
- Training of new staff and students
- Attendance at Liaison Group Meetings
- Team meetings
- Attendance at training courses for Continuing Professional Development
- Keeping abreast of changes in legislation and FSA guidance
- Systematic review and updating of health and safety policies and procedures

Reactive work:

- Investigation of accidents – could include fatalities
- Investigation of complaints
- Providing advice and information

The graph on the following page (**Fig.2**) shows the number and types of requests for service received by Officers for health and safety, year on year. Most requests for service relate to requests for advice, reports of unsatisfactory health and safety in premises, and requests for advice from one of our Primary Authority Partners.



**Fig.2**

## 2.4 Demands on the Health and Safety Service

2.4.1 North Devon Council has adopted the Health & Safety Executive risk based approach to proactive work and use complaint and incident selection criteria to help target interventions and make best use of resources.

2.4.2. There is no longer a requirement to risk rate businesses for health and safety in order to determine a programme of proactive inspections or for submitting as part of the annual return, (LAE1), to the HSE. However if officers become aware of a business in the area that they believe to be high risk, through complaints or other source, then the business will be visited to determine its risk rating and to carry out any necessary intervention to reduce the risk.

2.4.3 Due to the risk based approach, there are very few premises, if any that will be visited as a result of a scheduled inspection. The main demands placed on the service will be from a combination of responses to events such as accidents, complaints and business enquiries plus work on topics identified by the HSE (Appendix 1.) and locally identified priorities (Appendix 2) such as catering gas safety, swimming pools, open farms and visitor attractions and warehouse safety.

### 2.4.4.

In addition to premises based businesses, there are a number of public events and entertainments where the local authority has health and safety regulatory responsibilities and these are serviced through the Safety Advisory Group. Representatives from North Devon Council the Police, Fire Service, Devon County Council Highways Department and South West Ambulance Service meet with the event organisers to discuss the safety arrangements for the event.

#### 2.4.5 Primary Authority Partnerships

The Primary Authority Principle was launched in 2009 to make the local regulation of businesses operating at multiple premises across the UK more consistent. In October 2017 the scheme was expanded to include all businesses, not just those with multiple premises. The operation of the Primary Authority scheme is a statutory responsibility of the Department for Business, Energy & Industrial Strategy, BEIS, whose role is to register partnerships, issue guidance and resolve disputes. Businesses have the right to form a statutory partnership with a single local authority, which then provides robust and reliable advice for other councils to take into account when carrying out inspections or dealing with non-compliance. It is the gateway to simpler, more successful local regulation.

North Devon Council fully endorses the Primary Authority principle and currently acts as the Primary Authority for the following four businesses:

- Parkdean Resorts Ltd
- Mole Valley Farmer
- Rawle Gammon and Baker (RGB)
- John Fowlers

Hours are allocated as required to each of our four Primary Authority Partners. The work carried out for Primary Authorities is split roughly 50:50 between food safety and health and safety.

Year	Hours	Income @£50ph
2015/16	20	None charged
2016/17	14	£700
2017/18	10.2	£510
2018/19 (to Dec 2018)	18	£916

During 2019-21 the Council will continue to operate as Primary Authority Partner with the above businesses, providing advice to the companies and responding to requests for information from other local authorities.

## 2.5 Access and Equal Opportunities

### 2.5.1 Accessing Services

Officers of the The Food, Health and Safety Team are located at Brynsworthy Environment Centre and The Ilfracombe Centre,

Requests for service may be received by:

- Telephone
- Personal visit to Lynton House, Barnstaple, The Ilfracombe Centre or Amory House, South Molton
- Email
- Letter

Office hours are 9.00am to 5.00 pm Monday to Friday.

Staff visit commercial and residential premises to carry out their normal duties. During out of office hours the duty officer can be contacted by telephone in an emergency.

Visits are made to premises outside of normal office hours where necessary.

All our offices are accessible to people with disabilities. The Council website ([www.northdevon.gov.uk](http://www.northdevon.gov.uk)) provides access to all services and links to information and advice on health and safety.

## **2.6 Enforcement Policy**

Action taken by Officers must be proportionate to the risks that need to be managed. Decisions will be made in accordance with the HSE Enforcement Policy Statement, the Enforcement Management Model and the Council's Enforcement Policy. Enforcement must be fair, consistent and equitable. The North Devon Council Enforcement Policy considers the requirements of the Regulators' Compliance Code and has regard to Crown Prosecution guidelines. The Policy outlines the enforcement options available for dealing with problems relating to non-compliance with the legislation and can be found at Appendix 4. (This policy is currently under review)

## **3. SERVICE DELIVERY**

### **3.1 Health and Safety Interventions.**

Under the previous Government's reforms, its publication 'Good Health and Safety, Good for Everyone', and more recently the Helping Great Britain Work Well strategy, protecting people in the workplace and wider society still remains a key priority. The reforms included reducing the inspection burden on business alongside focussing on better health and safety outcomes. Refining the intervention strategies for businesses by further improving the targeting of relevant and effective interventions and preserving inspection for higher risk premises and issues has led to a reduced number of proactive inspections being carried out by Officers. Proactive inspections are limited to those premises that fall in to the highest risk category. Officers no longer carry out routine inspections at premises, but are free to carry out more effective, outcome, focussed interventions. Interventions are carried out on the basis of risk, given national and local knowledge about the sector/ premises.

### **3.2 Intervention Plan**

The Council's intervention plan is therefore risk-based which focuses on tackling specific risks which have been identified by the HSE at national level, in accordance with document LAC 67/2 (Rev 7) - Advice/Guidance to Local Authorities and "The List" (Appendix 1). This is mandatory guidance under Section 18 HSWA. At local level, interventions are planned from research, intelligence, complaints or accident investigations and through agreement with the Devon & Cornwall Chief Officers Health & Safety Liaison Group Work Plan. (Appendix 2). As a result the team aims to focus resources into areas where they are likely to have the greatest impact.

3.2.1 LAC 67/2 (Rev 7) states:

Proactive inspection should only be used:

1. For high risk premises/ activities within the specific LA enforced sectors published by HSE; or
2. Where intelligence shows that risks are not being effectively managed.

"The List" describes the specific premises and topic areas that the Local Authority should visit to carry out proactive health and safety interventions. The list for 2019/20 contains 15 activities identified by the HSE where proactive inspections are specifically allowed, and these are listed in Appendix 1. These activities have been identified nationally as contributing to the highest rate of accidents/incidents and ill health at work, across all health and safety enforcing authorities. These are the same activities as were on the list for 2018/19.

It is clear from the 15 identified activities that there are significant constraints as to the interventions that the local authorities are permitted to make and combined with the fact that some of the premises on the list have not been identified in North Devon, along with reduced resource pressures few proactive inspections are now made.

3.2.2 The Devon & Cornwall Chief Officers Health & Safety Liaison Group work plan identifies activities which are locally identified priorities as well as the national priorities. See Appendix 2.

3.2.3 Officers will use the full range of intervention strategies to target these specific risks, using information from primary authorities, where appropriate. Officers continue to operate proactively with regards to complaints and accident investigations.

3.2.4 Unannounced proactive inspection will be reserved for activities and sectors published by the HSE or where intelligence suggests risks are not being effectively managed.

3.2.5 Officers also carry out health and safety work when visiting food premises for food hygiene inspections, in particular gas safety and the duty to manage asbestos requirements. These interventions are only recorded in the statistics reported at year end to HSE if they have resulted in a revisit purely for health and safety matters, hence the low numbers in the chart below.

3.2.6 The number of risk based Interventions carried out year on year is shown in the table below.

<b>Proactive Intervention</b>	<b>Number Carried out 2015/16</b>	<b>Number Carried out 2016/17</b>	<b>Number Carried out 2017/18</b>
Gas Safety in Catering Premises - resulting in action taken	2	2	12
Swimming & Spa Pool Safety & Water Quality.	15	13	6 (56- 2018 to date)
UV Tanning Issues	8	N/A	N/A
Asbestos Management –resulting in action taken	N/A	N/A	13
Education & Awareness	195	94	124

### **3.3 Accident Investigations**

Accidents are reported to North Devon Council via the HSE website. Officers do not investigate all accidents. All reported accidents are assessed against a set of investigation criteria by an Officer to determine whether or not an investigation will take place.

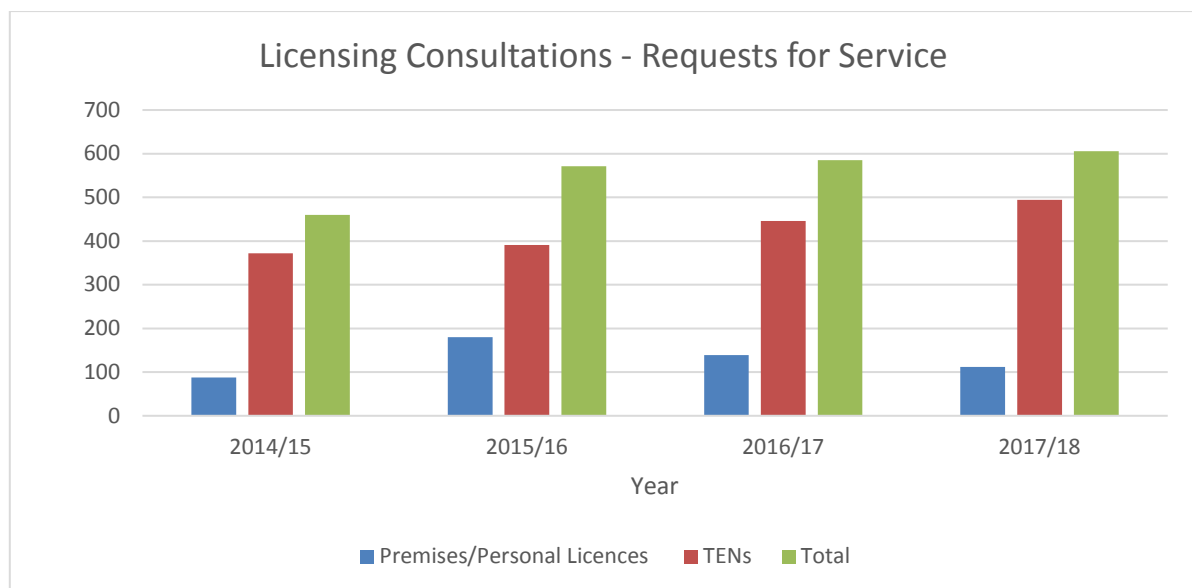
3.3.1 The trend in work-related accidents can be seen in the chart below which shows the total number and types of accidents/incidents reported to North Devon Council year on year.

<b>Classification of Accident</b>	<b>2015/16</b>	<b>2016/17</b>	<b>2017/18</b>
Unknown	4	0	17
Contact: Machinery	1	1	1
Contact: Electricity	0	0	0
Drowning/Asphyx	2	3	3
Exposure: Fire	2	0	0
Exposure: Substance	1	2	1
Exposure: Explosion	0	2	0
Fall from Height	5	14	13
Injured by Animal	0	1	0
Injured: Handling	3	5	4
Slip, Trip or Fall	43	39	44
Struck against Fixed Object	7	10	1
Struck by Object	5	2	8
Struck by Vehicle	0	0	0
Trapped by Object	1	3	0
Unclassified	2	6	15
<b>TOTAL</b>	<b>89</b>	<b>92</b>	<b>92</b>

3.3.2 Slips, trips and falls remain the highest cause of accidents reported closely followed by falls from height. There were no fatal accidents reported in the time periods above.

### 3.4 Requests for Service

The number of requests for service for health and safety is shown in the graph, Fig.2 on page 10. In addition the team receive notice of statutory consultation under the Licensing Act 2003 and Gambling Act 2005 in respect of matters regarding public safety for example applications for Temporary Event Notices (TENs) and Premises Licences. The graph and table (Fig 3. below).show the large number of requests for service received in relation to the team's role as licensing consultee.



Year	Number of Premises Licence Applications Consultations Received	Number of TEN applications received.	Total Licensing Consultations
2015/16	180	391	571
2016/17	139	446	585
2017/18	112	494	606

**Fig 3.**

### **3.5 Self Assessment Questionnaires**

120 Self Assessment Questionnaires are sent out to new and existing businesses each year. The accompanying letter provides guidance and links to website information to assist business operators. In particular businesses are advised to download the Safer Work Better Business pack to assist them in complying with health and safety legislation. This pack was written by the Devon & Cornwall Chief Officers' Health & Safety Liaison Group members and can be found at: <http://www.torbay.gov.uk/swbb> Returned completed questionnaires are read by officers and contact made with the business operator where incomplete information has been provided or advice sought. Business operators failing to return a completed questionnaire will be visited by an officer.

### **3.6 Advice to Businesses**

The service provides advice and support for businesses by telephone or email. As a rule, the service does not have the capacity to provide advisory visits, however Officers use their discretion in cases where it is deemed that an advisory visit will be in the interest of both the business operator and the Council. Information is available on the local authority website, with links provided to the HSE and other websites. Links to useful information are sent out to new businesses when they are sent a self assessment questionnaire.

In 2017/18 a Health & Safety Newsletter was sent out to 808 businesses by email.

### **3.7 Partnership Working**

In 2017/18 Officers continued to liaise with the Devon Fire and Rescue Service where they had concerns about fire safety in premises they inspected particularly in relation to gas appliances in catering establishments and people living above commercial premises.

### **3.8 Key Achievements and Outcomes 2017/18**

- Completion of self-assessment targets
- All service requests dealt with promptly
- Appropriate accidents investigated promptly
- Raised awareness of gas and fire safety in food premises
- Raised awareness of asbestos and the duty to manage the risk in food premises.
- Serviced Primary Authority Partnership

### 3.9 Summary of Health and Safety Activity 2017/18 LAE1 HSE Return

Table 2: Summary of local authority health and safety activity 1 April 2017 – 31 March 2018				
Only include information where health and safety was targeted as a priority for intervention For guidance on targeting and recording interventions for this return see: <ul style="list-style-type: none"> <li>• <a href="#">National LA Enforcement Code</a></li> <li>• <a href="#">List of higher risk activities in specific sectors suitable for proactive inspection (the 'List')</a></li> <li>• <a href="#">Supplementary Guidance</a></li> <li>• <a href="#">LAC 67/2 (rev 7) (Annex D)</a></li> <li>• <a href="#">Guidance on Combining H&amp;S and Food Inspections</a></li> </ul>				
Intervention type	Number of Inspections Interventions/Visits (each intervention must be counted only once)		Guidance	
	Targeted using National Intelligence	Targeted using Local Intelligence		
Proactive inspections	Proactive inspection	0	0	Proactive inspections are planned interventions where: <ol style="list-style-type: none"> <li>The use of warranted powers under health and safety legislation would, if necessary, be used to gain entry or otherwise regulate part or all of a business activity, and</li> <li>The reason for the inspection was to specifically target occupational health and safety issues at these premises.</li> </ol> Proactive inspections are <b>not</b> - Inspections undertaken primarily for reasons beyond occupational health and safety e.g. food hygiene, even if 'matters of evident concern' related to health safety happen to be identified and addressed during that inspection.  Proactive inspection should only be used for the activities in the sectors contained in the list which accompanies the National Code, or where there is local intelligence of failure to manage risk.
Non-inspection interventions	Other visits/face to face contacts	ASBESTOS 13	CHAS 12	Any visit/face to face contact to educate, advise or engage dutyholders, employees or other bodies such as trade associations e.g. awareness days and advisory support visits.
	Other contact/interventions	0	120	Any other targeted contact (not face to face) to educate, advise or engage dutyholders, employees or other bodies such as trade associations e.g. raising H&S awareness by providing information packs. Do not include non-targeted general newsletters, service magazines or the number of website hits.
Reactive visits	Visit to investigate health & safety related incidents	1		Record the number of actual visits made under the relevant category. HSE has developed a risk-based approach to <a href="#">complaint handling</a> and incident selection criteria ( <a href="#">LAC 22/13</a> ) which LAs should adopt to help target interventions and make best use of resources.
	Visits to investigate H&S complaints	9		
	Visits following requests for H&S service from businesses	2		[Intentionally left blank]
	Revisits following earlier intervention	0		Visits following an earlier intervention to confirm action previously required has been completed e.g. Notice compliance check.

Table 3: Number of enforcement actions 1 April 2017 – 31 March 2018					
(a) Improvement notices	(b) Deferred prohibition notices	(c) Immediate prohibition notices	(d) Simple cautions*	(e) Prosecution cases resulting in at least one conviction**	(f) Prosecution cases resulting in no conviction**
3	0	1	0	0	0

(d) Number of simple cautions\* (non-statutory procedure) to secure compliance of health and safety in England and Wales.  
 LA's in Scotland - please leave (d)\* (e)\*\* and (f)\*\* blank - simple cautions are not applicable in Scotland and the Procurator Fiscal (PF) provide us with prosecutions data directly.



## 4. RESOURCES

### 4.1 Financial Allocation

The budget for the Health and Safety Service year on year is shown in the table below. Figures for 2019/20 are not yet known.

Year	Cost	Cost per premises
2015/16	£59,720	£19.60
2016/17	£66,690	£22.70
2017/18	£60,770	£12.15
2018/19	£78,770	£15.95

### 4.2 Staffing Resources.

The National Local Authority Enforcement Code requires the Council to have sufficient capacity to undertake our statutory duties. The Food, Health and Safety Team is split in to 3 areas. Each area has a 1.0 FTE officer who carries out all work in their area, whether it be Food Safety or Health and Safety. In reality, the officers spend 0.1 FTE carrying out health and safety work. The Lead Officer also works as the Corporate Health and Safety Adviser for the Council and as such is designated as a 0.5 FTE.

A structure chart is available on page 6. The number of full time equivalent (FTE) officers carrying out food, health and safety work is set out in the following table:

Officer Post	FTE
Lead Officer	0.5
Environmental Health/Regulatory Service Officer	3.0
Case Officer (temp)	1.0/0.5 (TBC)

Prior to Dec 2016 there was a dedicated Health and Safety Officer in the Food, Health and Safety Team (0.6 FTE). Since the officer retired and the work has been split between three officers and the lead Officer the capacity to carry out proactive interventions has reduced.

With Officers spending most of their time meeting the demands of the Food Standards Agency driven programme of Food Safety Inspections, there is little time left to devote to health and safety with this accounting for approximately 0.1 FTE per Officer, and 0.05 FTE Lead Officer equating to 0.35 FTE in total for health and safety.

### 4.3 Officer Development

4.3.1 The National Local Authority Enforcement Code requires the Council to appoint suitably qualified officers authorised under Sect 19 of the HSWA.

Authority to appoint inspectors under the Act is delegated to the Head of Environmental Health and Housing Services by the Council's constitution.

Competency of inspectors is assessed prior to authorisation through a structured internal process

4.3.2 The Council will support the training and development of officers to ensure their competence and will maintain the internal appraisal scheme, Regulators Development & Needs Assessment. (RDNA) assessments and Continual Professional Development (CPD) accreditation requirements.

## 5. ASSESSMENT AND PERFORMANCE MANAGEMENT

### 5.1 Quality Assessment

5.1.1 Health & safety data on interventions, enforcement and prosecution activity is monitored and recorded on our Northgate M3 software system. Annual returns are

made to the HSE and the data is published on our website as part of the service planning document.

5.1.2 The Lead Officer will monitor intervention records by accessing Northgate M3 files and checking the quality of officers' work. If satisfactory the manager will record a satisfactory action code on the worksheet. If unsatisfactory, the manager will record an unsatisfactory code and discuss the matters that require improvement with the Officer concerned.

5.1.3 Once a year the Lead Officer will accompany officers on a visit to monitor the quality of service delivery and record his/her findings on the observational audit form. The monitoring visit will inform the appraisal process.

5.1.4 Any compliments and complaints received about the service are fed back to the Lead Officer to action as appropriate and the action taken is recorded by the Case Officer.

5.1.5 Peer review is carried out as part of the Devon & Cornwall Chief Officers' Health & Safety Liaison Group activity, for all authorities in Devon and Cornwall. These can take the form of inter-authority audits or desktop scenarios

5.1.6 We have the following monitoring arrangements in place to assist in the quality assessment of the work carried out:

- Senior Officer Review of a sample of worksheets for each officer throughout the year.
- Joint visits with inspectors
- Monthly Team meetings
- Performance appraisals

## **6. REVIEW**

### **6.1 Review Against the Service Plan**

6.1.1 We have developed a number of indicators to assess our health and safety performance. Details of the team's performance against the targets set in the Food, Health & Safety team's 2017/18 work plan can be found at Appendices 3 and 5. Proposed targets for 2018/19 are also in Appendix 3.

6.1.2 The summary of Health and Safety Activity for 2017/18 can be found on page 16.

6.1.3 The Service Plan and performance will be reviewed annually by the Lead Officer.

### **6.2 Identification of Variations**

6.2.1 The Lead Officer will identify any variance, from the Service Plan and the reasons and propose an action plan to remedy the situation as appropriate. Work in other areas of the enforcement mix will be reviewed to identify whether or not it has contributed/addressed any apparent deficiencies.

### **6.3 Areas of Improvement**

6.3.1 The Lead Officer will seek to identify opportunities to improve the service and where appropriate, prepare an appropriate action plan to address those service issues.

## HSE Intervention Plan 2019/20 & 2020/21

Produced to meet the requirements of LAC67/2 (rev 7) -Advice/Guidance to Local Authorities on targeting interventions. This is mandatory guidance under Section 18 Health & Safety at Work etc Act 1974 (“The List”)

- 1. PROACTIVE INSPECTIONS** will only be carried out at:
- High risk or ‘A’ risk premises – 0 premises identified currently.  
or
  - Businesses having specific activities falling in the specific sector categories set out in circular LAC 67/2 (rev 7) National Local Authority Enforcement Code & HSE sector strategies for 2019/20. (Rev 8 is due in April, but have the same content in “The List” same as rev 7)

No.	Hazards Identified for Investigation.	High Risk Sectors	High Risk Activities	NDC 2019/20 & 2020/21
1.	Risks of Legionella infection	Premises with cooling towers/evaporative condensers	Lack of suitable legionella control measures including premises that have *Not yet demonstrated the ability to manage their legionella risk in a sustained manner or *Relevant enforcement action in the ;last 5 yrs. and have not yet demonstrated sustained control of risk	No premises identified which fall to ND enforcement.
2.	Explosion caused by leaking LPG	Communal/amenity buildings on caravan/camping parks with buried metal LPG pipework	Caravan/camping parks with poor infrastructure risk control/management of maintenance	None yet identified
3.	Risks of E.coli/cryptosporidium infection, especially in children	Open farms/animal visitor attractions (including where an animal visits a nursery)	Lack of suitable micro-organism control measures	All known fixed premises visited in preceding years. New ones to be visited as they are identified. Provide guidance and information to Nurseries.
4.	Risks of fatalities/injuries resulting from being struck by vehicles	High volume Warehousing/distribution. (Typically larger warehousing/distribution centres with frequent transport movements/work at height activity.)	Poorly managed workplace transport	12 warehouses but no intel to suggest they are poorly managed.
5.	Risks of fatalities/injuries resulting from falls from height/amputation and crushing injuries	Industrial retail/wholesale premises, e.g. steel stockholders, builders/timber merchants	Poorly managed workplace transport/ work at height/cutting machinery /lifting equipment	9 builders merchants and 12 warehouses but no intel to suggest they are poorly managed.
6.	Industrial diseases (occupational deafness/	Industrial retail/wholesale premises, e.g. steel stockholders,	Exposure to excessive noise (steel stockholders). Exposure to respirable crystalline silica (Retail outlets	As above, No steel stock holders.

	occupational lung disease - silicosis)	builders/timber merchants	cutting/shaping their own stone or high silica content 'manufactured stone' e.g. gravestones or kitchen resin/stone worktops)	Stone masons,
7.	Occupational lung disease (asthma)	In-store bakeries and retail craft bakeries where loose flour is used and inhalation exposure to flour dust is likely to frequently occur i.e. not baking pre-made products.	Tasks where inhalation exposure to flour dust and/or associated enzymes may occur e.g. tipping ingredients into mixers, bag disposal, weighing and dispensing, mixing, dusting with flour by hand or using a sieve, using flour on dough brakes and roll machines, maintenance activities or workplace cleaning.	13 instore bakeries in Supermarkets and 3 artisan bakeries.
8.	Musculoskeletal Disorders (MSDs)	Residential care	Lack of effective management of MSD risks arising from moving and handling of persons	No intel to suggest any premises require an intervention
9.	Falls from height	High volume Warehousing/distribution. (Typically larger warehousing/distribution centres with frequent transport movements/work at height activity.)	Work at height	12 warehouses but no intel to suggest lack of effective management
10.	Manual Handling	As above	Lack of effective management of manual handling risks	12 warehouses.
11.	Unstable loads	As above and also steel stockholders; builder's and timber merchants	Vehicle loading and unloading	9 builders merchants and 12 warehouses
12.	Crowd management & injuries/fatalities to the public	Large scale public gatherings e.g. cultural events, sports, festivals & live music	Lack of suitable planning, management and monitoring of the risks arising from crowd movement and behaviour as they arrive, leave and move around a venue	18 events in 2017/18 required interventions with event organisers via the Safety Advisory Group.
13.	Carbon monoxide poisoning	Commercial catering premises using solid fuel cooking equipment	Lack of suitable ventilation and/or unsafe appliances	No premises identified
14.	Violence at work	Premises with vulnerable working conditions (lone/night working/cash handling e.g. betting shops/off-licences/hospitality6) and where intelligence indicates that risks are not being effectively managed	Lack of suitable security measures/procedures. Operating where police/licensing authorities advise there are local factors increasing the risk of violence at work e.g. located in a high crime area, or similar local establishments have been recently targeted as part of a criminal campaign	No premises identified
15.	Fires and explosions caused by the initiation of explosives, including fireworks	Professional Firework Display Operators	Poorly managed fusing of fireworks	No businesses identified

**DEVON CHIEF OFFICERS LIAISON GROUP WORK PLAN  
2017/18, 2018/19, 2019/20**

Sector, premises type or specific cross sector activity (Where do you plan to intervene?)	Evidence that identified the concern and set its priority (e.g. statistics, RIDDOR reports, local intelligence Why is it appropriate to address at this time? Can you identify the poor performers?)	Rationale for intervention  (Why are you using this intervention? Have you considered using other interventions? Does it fit in with previous action to address this issue? Does it bundle with other activity? Are your outputs measurable?)	Planned activity or resource  (What action will be taken, work with partners/media campaign/ write to proprietors/inspection etc. Make clear what action all authorities are going to do (minimum) and which authorities are going to take additional action.)	Local Authority action – what will be put in to developing and completing each project
Asbestos – duty to manage	National Priority	Reduction in ill health from asbestos exposure	Continued project included in food visits where appropriate. Raise awareness of SWBB sheet and pack in general. Provide training on duty to manage for non compliant businesses. Enforcement action where appropriate	
Ill health from animal contact at visitor attractions	National Priority Public health issue from E.Coli and other zoonotic infections.	Public health and safety	Individual authorities to consider action to take with animal contact attractions in their areas.	
Warehousing, work at height, fragile roof and asbestos management	National Priority and link with migrant worker /modern slavery agenda & joint working opportunities	Reduction of injuries at work, public health and safety	Group to develop inspection pack and aide memoire and officer training requirements for October training day	Proactive inspection
Legionella, Crypto and Giardia - caravan site spa pools/ pop up spa pools	Local priority - local sampling indicates general management issues, recent interest from HPAG on Crypto and recent Giardia cases.	Public health	Letter to all pool owners when new Management Guidance issued by HSE following consultation. Collate complain evidence and any public health concerns to establish how widespread issues are.	Letter to go to proprietors when agreed
Buried metallic pipework LPG on Caravan sites	LLARD and Local priority	Public safety	LLARD being withdrawn. Individual authorities to consider what action they wish to take	Complete by March 2018
Violence in the night time economy	Local priority	Public safety	All authorities to report on all complaints/accidents/RIDDORs and any Police licensing L10 reports on assaults etc over next 6 months to establish issues.	Liaise with BBfA Chamber, Licensing Teams and Community Safety teams to disseminate information to employers.

Sector, premises type or specific cross sector activity (Where do you plan to intervene?)	Evidence that identified the concern and set its priority (e.g. statistics, RIDDOR reports, local intelligence Why is it appropriate to address at this time? Can you identify the poor performers?)	Rationale for intervention  (Why are you using this intervention? Have you considered using other interventions? Does it fit in with previous action to address this issue? Does it bundle with other activity? Are your outputs measurable?)	Planned activity or resource  (What action will be taken, work with partners/media campaign/ write to proprietors/inspection etc. Make clear what action all authorities are going to do (minimum) and which authorities are going to take additional action.)	Local Authority action – what will be put in to developing and completing each project
Migrant worker issues Identification of food premises where may be an issue	National priority with Modern Slavery agenda.	Public health, safety and welfare.	Staff information and training. Development of aide memoire for identifying issues of concern during visits by end October 2017.	Add to officer training day
Body modification issues Skin piercing/scarification/implants Laser treatments/nail bars	Rapid expansion of the body modification industry in the region, with easy access to equipment and large numbers of unregistered tattooists with suspect experience and knowledge posing a problem. Easy spread of infection from inadequately sterilized equipment.	Public health and safety	Work with Police to raise awareness of issues and under age tattooing Develop two yearly audit procedures for registered Tattooists. Public health interventions for scratchers. Public health interventions for nail bars.	DoH CIEH toolkit being used in new premises
Officer competency training	RDNA and intervention initiative requirements. Maintain officer competence.		Intention to provide CPD training for officers in specific subjects to support work plan elements Quarterly peer review to be provided for all teams to undertake. Put all staff through RDNA tool over Quarter 1 of next year to identify significant training needs.	PAD Training day in October 2017
Inter-Authority Auditing	Maintain competence and confidence on Authorities management of the health and safety enforcement function.		Officer Competency and Authorisation Auditing to start December 2017. Investigate FSA Audit framework as possible tool for audits	To start in December 2017 and complete by April 2018

## PERFORMANCE INDICATORS

		Target 2018/19	Actual 2017/18
Structural	Human resource: - Managerial	Public Protection Manager 0.6 FTE	Public Protection Manager 0.6 FTE
	Lead Officer Compliance Officers	0.15FTE 3.0 FTE	0.5 FTE 2.0 FTE Graduate 1.0 FTE
	Admin Officer	0.5 FTE	0.5 FTE
	Financial resource	£78,770	£60,770
Process efficiency	No. of service requests	639	639
	Percentage of requests for service responded to within target time	90%	90%
	Percentage of requests for service completed within target time	90%	90%
Output	Completion of Intervention plan	100%	100%
	Completion of tattoo project	100%	100%
	Completion of spa pools project	100%	100%
	Maintaining competence and service support for Primary Authority partnerships.	100%	100%
Outcome	Percentage of premises that have improved their risk rating following a visit.	100%	100%
	Customer satisfaction	90%	90%
Cost effectiveness	Ratio of enforcement officers to regulated businesses	1:7855	1: 3801
	Fairness of service provision	100%	100%
Equity	Fair distribution of service according to need	100%	100%
	Number of new businesses supported	100%	100%

**COUNCIL ENFORCEMENT POLICY** (*This Policy is currently under review*)**Introduction**

This policy is an “umbrella” policy and is intended to apply to all service areas, though it should be noted that various additional service-specific requirements apply to specific enforcement activities in certain services, i.e. Health and Safety, Food Safety, Environmental Protection/Environmental Crime, Private Sector Housing, Licensing. Information on these may be obtained from the Head of Environmental Health & Housing Services.

The purpose of this policy is to publicly summarise the Council’s intended approach to bring about compliance with regulatory requirements. However, it is ultimately the responsibility of individuals and businesses to comply with the law.

The Council shares the Government’s view that effective and well targeted regulation is essential in promoting fairness and protection from harm and that as regulators we should adopt a positive and pro-active approach towards ensuring compliance by: -

- Helping and encouraging regulated entities to understand and meet regulatory requirements more easily; and
- Responding proportionately to regulatory breaches.

The Council will take a soft brush approach to those who comply with regulatory requirements and those who work with us to achieve compliance. However, we will not hesitate to take all necessary enforcement action against those who, for example, commit serious breaches, flout the law, refuse to work with us to seek compliance, commit offences which are prevalent in the district.

The Council has set out its strategic aims and objectives and our enforcement services will carry out their duties in support of these. These aims and objectives are set out in: -

- Council policy and strategic decisions;
- North Devon Council’s Corporate Business Plan;
- The service-specific service plans and inspection policies, which reflect the above priorities and the core enforcement activities for each service.

The Council’s aims and objectives have been drawn up in consultation with the public. Details of the consultation are available from the PPI on the Council’s website [www.northdevon.gov.uk](http://www.northdevon.gov.uk).

**Compliance**

A range of activities will be undertaken to ensure compliance with legislation. Advice and guidance will be provided; proportionate, programmed and intelligence led inspections will be undertaken and, where necessary, inspections will be undertaken in response to complaints from third parties. Some enforcement services will also have officers patrolling the streets.

Where non-compliance is discovered, options to promote/seek compliance will include: -

- Undertaking pro-active education programmes;
- Explaining legal requirements and, where appropriate, the means to achieve compliance;
- Providing an opportunity to discuss points in issue, where appropriate;



- Consideration of alternative means and reasonable time scales and to achieve compliance;
- Service of advisory letters, warnings, Statutory Notices or prohibitions detailing non-compliance;
- Enforcement actions including, but not limited to, formal action, seizure of documents or goods, closure of premises, caution, prosecution and/or injunction.

Immediate, without Notice, enforcement action may be taken, but only where deemed necessary, reasonable and proportionate.

### **Enforcement Actions**

The decision to use enforcement action will be taken on a case by case basis and to ensure consistency of approach, in accordance with this and any other more specific policies, which may be applicable. The action taken, which may be immediate, will be proportionate to the gravity and nature of the non-compliance. Factors that will be taken into consideration include, but are not limited to: -

- The risk that the non-compliance poses to the safety, health or economic welfare of the public at large or to individuals;
- Evidence that suggests that there was pre-mediation in the commission of an offence;
- The alleged offence involved a failure to comply in full or in part with the requirements of a statutory Notice or Order;
- There is a history of previous warnings or the commission of similar offences;
- Aggravated circumstances such as obstruction of an officer or aggressive behaviour towards the public;
- The offence, although not serious itself, is widespread in the area where it is committed;
- Death was a result of a breach of legislation;
- The gravity of an alleged offence, taken together with the seriousness of any actual or potential harm;
- The general record and approach of the offender;
- There has been reckless disregard of health and safety requirements;
- There has been a repetition of a breach that was subject to a formal caution;
- False information has been supplied wilfully, or there has been intent to deceive.

### **Legal and Policy Context**

Enforcement actions are taken within the context of a legal and policy framework. Council enforcement services will carry out their enforcement-related work with due regard to the Enforcement Concordat. This concordat arises from a Central Government initiative and has been adopted by the Council. The Concordat lays out the principles of good enforcement. These are: -

- Publishing clear standards, setting out the level of service and performance that the public and businesses can expect to receive;
- Dealing with the public and the business in an open and honest way;
- Providing a courteous, efficient and helpful service;
- Responding promptly and positively to complaints about the service;
- Ensuring that enforcement action is proportionate to the risks to the public;
- Carrying out duties in a fair, equitable and consistent manner.

In approving this enforcement policy and when setting service-specific enforcement requirements, in respect of those local authorities' functions specified in Part 3 of the Schedule to the Legislative and Regulatory Reform (Regulated Functions) Order 2007,

the Council had, and will continue to have, regard to the statutory Regulators' Compliance Code, issued by the Minister of State for the Department for Business, Enterprise and Regulatory Reform under Section 22 (1) of the Legislative and Regulatory Reform Act 2006. This will also apply to any further functions to which the said code might be applied.

Service-specific risk-rated inspection policies will be set, in respect of those functions, which are considered deserving of co-ordinated monitoring.

Any decision to prosecute will be taken in accordance with the Code for Crown Prosecutors. A fully copy of the code is available from: -

CPS Public Enquiries  
102 Petty France  
London  
SW1H 9EA  
Telephone: 020 3357 0899  
Email: [enquiries@cps.gov.uk](mailto:enquiries@cps.gov.uk)

Enforcement decisions and actions will be made with due regard to the provisions of: -

- The Human Rights Act;
- The Crime & Disorder Act;
- Equal rights and anti-discrimination legislation;
- Service-specific legislation;
- All other relevant legislation applicable from time to time.

Information concerning non-compliance may be shared with other enforcement agencies. Any such action will only be undertaken in the public interest and in compliance with the Data Protection Act 1998. *{now General Data Protection Act 2018}*

### **Authorisation of Officers**

Only officers who are competent by training, qualification and/or experience will be authorised to take enforcement action. Officers will also have sufficient training and understanding of this enforcement policy to ensure a consistent approach to their duties. Officers are required to show their written authorisation on demand.

### **Status and Review**

This policy was endorsed and adopted by the Council by minute 28 of Full Council on 25th June 2008 This policy is currently under review.

This is a public document and further copies of this and associated documents can be obtained from:

J W Mann, Head of Environmental Health & Housing Services  
North Devon Council

E-mail: [customerservices@northdevon.gov.uk](mailto:customerservices@northdevon.gov.uk)

Complaints concerning the application of this enforcement policy are dealt with in accordance with the Council's customer complaints' procedure. Details of the procedure are available from Customer Services, tel. no. (01271) 327711

## ENVIRONMENTAL HEALTH CUSTOMER CHARTER

## REQUEST FOR SERVICE PERFORMANCE TARGETS

Regulatory Services team (*Working days*)

	First Response Target	Completion
<b>General</b>		
Leaflet/Applic Reqst	2	5
Task: C147 Asbestos Enquiry	5	10
Task: C148 Education/Training	5	60
Task: C420 Freedom of Info Act Rqst	10	20
Task: C437 Compliment - HLTH/FD/SAFETY	None	20
Task: C521 Primary Authority Request	3	65
Task: C587 Better Business for All Query	5	30
Task: C588 Data Access Request	5	20
<b>Licensing</b>		
Task: C562 LA03 TEN Consultation	3	3
Task: C428 LA03 Temp. Event Notice RFS	3	20
Task: C432 LA03 Resp Authority Consult'n	20	20
Task: C218 Ear Piercing Unsatis	3	20
Task: C238 Tatooists Lic. Unsat	3	20
Task: C255 Electrolysis Unsatis	3	20
Task: C256 Acupuncture Lic App	5	20
Task: C257 Acupuncture Unsatis	3	20
Task: C313 Body Pierce Unsatis	3	30
<b>Health &amp; Safety at Work</b>		
Task: C006 ASB5 Asbestos Notification	15	15
Task: C018 Unsat HSW Premise	5	60
Task: C019 Health & Safety at Work Advice	5	30
Task: C020 Asbestos Request for Service	1	180
Task: C021 Under 8's Reg.	20	20
Task: C022 Res. Home Reg	20	20
Task: C023 Children's Home Reg.	20	20
Task: C024 OSR Registration	10	10
Task: C025 Lift Inspection-Urg.	1	15
Task: C026 Lift Inspection Adverse	5	60
Task: C145 Swimming PI- Serious	1	30
Task: C149 Swimming PI – Minor	5	60
Task: C549 HSW SWW Disconnect Water	3	15
<b>Accidents - Reportable F2508</b>		
Task: A001 Fatality	1	180
Task: A004 Dangerous Occurrence	0	131
Task: A007 Non-Reportable Accident	5	60
Task: A008 Dangerous Gas Fitting Report	5	60
Task: A009 Over 7 Day Injury	15	60
Task: A010 Specified Injury	5	60
Task: A011 Injury to Non-Worker	5	60