

Public Agenda Pack



Notice of Meeting of

HUMAN RESOURCES COMMITTEE

Tuesday, 26 March 2024 at 2.00 pm

**Council Chamber, Council Offices, Cannards
Grave Road, Shepton Mallet BA4 5BT**

To: The members of the Human Resources Committee

Chair: Councillor Theo Butt Philip

Vice-chair:

Councillor David Fothergill	Councillor Mandy Chilcott	Councillor Mark Healey
Councillor Andy Kendall	Councillor Graham Oakes	Councillor Emily Pearlstone
Councillor Faye Purbrick	Councillor Leigh Redman	Councillor Tony Robbins
Councillor Mike Stanton	Councillor Sarah Wakefield	

For further information about the meeting, including how to join the meeting virtually, please contact Democratic Services democraticservicesteam@somerset.gov.uk.

All members of the public are welcome to attend our meetings and ask questions or make a statement **by giving advance notice** in writing or by e-mail to the Monitoring Officer at email: democraticservicesteam@somerset.gov.uk by **5pm on Wednesday, 20 March 2024**.

This meeting will be open to the public and press, subject to the passing of any resolution under the Local Government Act 1972, Schedule 12A: Access to Information.

The meeting will be webcast and an audio recording made.

Issued by (the Proper Officer) on Monday, 18 March 2024

AGENDA

Human Resources Committee - 2.00 pm Tuesday, 26 March 2024

Public Guidance Notes contained in Agenda Annexe 5 - 6

Click here to join the online meeting 7 - 8

1 Apologies for Absence

To receive any apologies for absence.

2 Minutes from the Previous Meeting (Pages 9 - 12)

To approve the minutes from the previous meeting.

3 Declarations of Interest

To receive and note any declarations of interests in respect of any matters included on the agenda for consideration at this meeting.

(The other registrable interests of Councillors of Somerset Council, arising from membership of City, Town or Parish Councils and other Local Authorities will automatically be recorded in the minutes: [City, Town & Parish Twin Hatters - Somerset Councillors 2023](#))

4 Public Question Time

The Chair to advise the Committee of any items on which members of the public have requested to speak and advise those members of the public present of the details of the Council's public participation scheme.

For those members of the public who have submitted any questions or statements, please note, a three minute time limit applies to each speaker and you will be asked to speak before Councillors debate the issue.

We are now live webcasting most of our committee meetings and you are welcome to view and listen to the discussion. The link to each webcast will be available on the meeting webpage, please see details under 'click here to join online meeting'.

5 HR Policies (Pages 13 - 52)

To receive an update on HR Policies.

6 Update on Staff matters (Pages 53 - 62)

To receive an update on Agency and Locum staff numbers and vacancies.

7 Work force update (Pages 63 - 70)

To note the presentation on an update on workforce

8 Health & Safety policies (Pages 71 - 204)

To consider and approve Health and Safety Policies.

The Culture Report, Survey results and Update paper are provided for information.

9 Committee Workplan (Pages 205 - 206)

To consider the committee forward workplan.

Guidance notes for the meeting

Council Public Meetings

The legislation that governs Council meetings requires that committee meetings are held face-to-face. The requirement is for members of the committee and key supporting officers (report authors and statutory officers) to attend in person, along with some provision for any public speakers. Provision will be made wherever possible for those who do not need to attend in person including the public and press who wish to view the meeting to be able to do so virtually.

Inspection of Papers

Any person wishing to inspect minutes, reports, or the background papers for any item on the agenda should contact Democratic Services at democraticserviceteam@somerset.gov.uk or telephone 01823 357628.

They can also be accessed via the council's website on [Committee structure - Modern Council \(somerset.gov.uk\)](#)

Members' Code of Conduct requirements

When considering the declaration of interests and their actions as a councillor, Members are reminded of the requirements of the Members' Code of Conduct and the underpinning Principles of Public Life: Honesty; Integrity; Selflessness; Objectivity; Accountability; Openness; Leadership. The Code of Conduct can be viewed at: [Code of Conduct](#)

Minutes of the Meeting

Details of the issues discussed, and recommendations made at the meeting will be set out in the minutes, which the Committee will be asked to approve as a correct record at its next meeting.

Public Question Time

If you wish to speak or ask a question about any matter on the Committee's agenda please contact Democratic Services by 5pm providing 3 clear working days before the meeting. (for example, for a meeting being held on a Wednesday, the deadline will be 5pm on the Thursday prior to the meeting) Email democraticserviceteam@somerset.gov.uk or telephone 01823 357628.

Members of public wishing to speak or ask a question will need to attend in person or if unable can submit their question or statement in writing for an officer to read out, or alternatively can attend the meeting online.

A 20-minute time slot for Public Question Time is set aside near the beginning of the meeting, after the minutes of the previous meeting have been agreed. Each speaker will have 3 minutes to address the committee.

You must direct your questions and comments through the Chair. You may not take a direct part in the debate. The Chair will decide when public participation is to finish. If an item on the agenda is contentious, with many people wishing to attend the meeting, a representative should be nominated to present the views of a group.

Meeting Etiquette for participants

Only speak when invited to do so by the Chair.

Mute your microphone when you are not talking.

Switch off video if you are not speaking.

Speak clearly (if you are not using video then please state your name)

If you're referring to a specific page, mention the page number.

There is a facility in Microsoft Teams under the ellipsis button called turn on live captions which provides subtitles on the screen.

Exclusion of Press & Public

If when considering an item on the agenda, the Committee may consider it appropriate to pass a resolution under Section 100A (4) Schedule 12A of the Local Government Act 1972 that the press and public be excluded from the meeting on the basis that if they were present during the business to be transacted there would be a likelihood of disclosure of exempt information, as defined under the terms of the Act.

If there are members of the public and press listening to the open part of the meeting, then the Democratic Services Officer will, at the appropriate time, ask participants to leave the meeting when any exempt or confidential information is about to be discussed.

Recording of meetings

The Council supports the principles of openness and transparency. It allows filming, recording, and taking photographs at its meetings that are open to the public - providing this is done in a non-disruptive manner. Members of the public may use Facebook and Twitter or other forms of social media to report on proceedings. No filming or recording may take place when the press and public are excluded for that part of the meeting.

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Minutes of a Meeting of the Human Resources Committee held in the Sedgemoor Room, Bridgwater House, King Square, Bridgwater, TA6 3AR, on Tuesday, 9 January 2024 at 2.00 pm

Present:

Cllr Theo Butt Philip (Chair)

Cllr Mandy Chilcott

Cllr Graham Oakes

Cllr Faye Purbrick

Cllr Sarah Wakefield

Cllr David Fothergill

Cllr Emily Pearlstone

Cllr Mike Stanton

Other Members present remotely:

Cllr Mark Healey

Cllr Leigh Redman

13 Apologies for Absence - Agenda Item 1

Apologies were received from Councillors Andy Kendall and Tony Robins.

Councillors Mark Healey and Leigh Redman joined the meeting remotely.

14 Minutes from the Previous Meeting - Agenda Item 2

Resolved that the minutes of the Human Resources Committee held on 10 October 23 be confirmed as a correct record.

15 Declarations of Interest - Agenda Item 3

There were no additional declarations of interest.

16 Public Question Time - Agenda Item 4

The Chair noted that no public questions had been received.

17 Chief Officer Pay Award 2023/24 - Agenda Item 6

The Chair invited Sarah Lewis – Service Manager – Workforce Reward to introduce the report. And she explained that Members were being asked to consider the report and the recommendations below:

- Note the nationally agreed pay award and updated Somerset salary rates.
- Note the new structure for chief officers including 23/24 pay award.
- Agree a payment award of 3.5% increase for the chief executive.

There was a discussion, and Members received reassurances on the following points:

The backdating of the pay award; the backdating of pension; how the backdated pay aligns with chief executives across the country; the date of pay award and the discussion of chief executives pay at full council meetings in 2022.

There was a brief discussion about the report discussed at full council to confirm the chief Executive's appointment and points were answered by Sari Brice – Strategic Manager HR practice and Alyn Jones – Executive Director – Strategy Workforce Localities. The committee were satisfied with responses given.

An amendment to the final recommendation to include “subject to this not having previously been agreed by full council” was suggested. The amendment, having been proposed and seconded, was unanimously agreed and the Committee agreed to award a 3.5% pay increase for the chief executive.

18 Pay Policy Statement 2024/25 - Agenda Item 5

The Chair invited Sarah Lewis – Service Manager – Workforce Reward to introduce the report.

The committee were asked to consider the report and the two recommendations:

- That the chief executive takes the payment policy report to full council.
- That the amount of interim proposed pay that needs formal approval from

Resource Management Board be decreased to £350 a day from £500.

A discussion was had, and the following points were noted:

Clarification over the changes in Page 13, section 11.1; clarification over item 8.

The report was passed by the committee the vote was unanimous.

19 Health and Safety Policies - Agenda Item 7

This item was deferred to the next committee meeting 26 March.

20 Employment Policies - Agenda Item 8

This item was deferred until the next committee meeting 26 March.

21 Workforce Update - Agenda Item 9

The interim Director of Workforce was invited to provide an update on workforce matters and the following points were noted.

- The focus on the organisation is supporting the financial emergency.
- New set of values have been launched by the organisation.
- An update on Tier 4 restructuring.
- An update was given on wellbeing support for staff.
- Developing a new business case for a new approach
- Allocation of senior staff to specific projects to support the organisation.

22 Committee Workplan - Agenda Item 10

The Chair invited members to consider the Committee's forward workplan of agenda items scheduled for future meetings.

There was a brief discussion and reports on the following topics were requested for future meetings:

- An update on the number of staff vacancies and verifying data held on SAP.
- Feedback/reports to show staff engagement with CareFirst over the last 12 months.

- The number of locum staff, and work to safeguard those in hard to recruit roles during the Council restructuring/transformation.
- An update on learning and development of staff and an overview of apprentices at the Council including the apprenticeship levy.

The Chair, after ascertaining there were no other items of business, thanked all those present for attending and closed the meeting.

(The meeting ended at 3.07 pm)

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CHAIR

Agenda Item 5

Somerset Council

Human Resources Committee

26th March 2024

Somerset Council Employment Policy for Approval

Executive Member: Theo Butt Philip Lead Member for Transformation and Human Resources

Lead Officer: Dawn Bettridge, Service Director - Workforce

Author: Sarah Welland, Service Manager – HR Policy & Projects

Contact Details: 01823 359882 / sarah.welland@somerset.gov.uk

<i>Please complete sign off boxes below prior to submission to Community Governance</i>			
	Seen by:	Name	Date
Report Sign off	Legal	Jill Byron	10/3/24
	Corporate Finance	Nicola Hix	4/3/24
	Human Resources	Dawn Bettridge	1/3/24
	Executive Member	Cllr Theo Butt Philip	11/3/24
	Monitoring Officer	David Clark	14/03/24
	Summary:	This report details the proposed new Carer's Leave Policy, which meets the requirements of the Carer's Leave Act 2023, due to be implemented on 6 th April 2024.	
Recommendations:	The members of the HR Committee are asked to formally approve the attached new Carer's Leave policy.		
Reasons for Recommendations:	To ensure that Somerset Council meets its legal obligations under the Carer's Leave Act 2023 by setting out clearly how Carer's Leave will be implemented. Somerset Council recognises the increasing number of employees who have caring responsibilities and this policy aims to support them with a clear process for requesting carer's leave.		
Links to Priorities and Impact on Service Plans:	A core function & priority of the HR Policy team is to ensure that HR policies are legally compliant.		
Financial, Legal and HR Implications:	Financial – there are no financial implications as Carer's Leave is unpaid. HR – having a clear policy on the Council's approach to Carer's Leave ensures that employees understand their entitlements and the support available to them.		

	Legal- the Carer’s Leave policy is written in line with the Carer’s Leave Act 2023 to ensure that it is legally compliant.
Equalities Implications:	The Council’s duty under Section 149 of the Equality Act 2010 is to have “due regard” to the matters set out in relation to equalities when considering and making decisions. An equalities impact assessment has been completed for this policy.
Risk Assessment:	N/A
Scrutiny comments / recommendation (if any):	N/A

1 Background

- 1.1 The Carer’s Leave Act 2023 will introduce a new statutory right for employees, effective from 6th April 2024. This is a new right to five days’ unpaid leave per year (pro rata), for employees who have a dependent with a long-term care need.
- 1.2 Carer’s Leave will be a day one employment right and employees will not need to provide evidence of caring responsibilities. Further detail on the criteria and process is contained in the policy at appendix 1.

2 Options Considered

- 2.1 An alternative option would be to not implement a policy. This option is discounted for two reasons. Firstly, having a policy sets out clearly that the Council has recognised and implemented the legislation. Secondly, it supports consistent and fair application of Carer’s Leave, assisting employees in understanding the support that is available to them and how to access this.

3 Consultations Undertaken

- 3.1 This policy has been informally consulted upon with trade unions and will also be presented to the March meeting of the Joint Consultative Forum for final, formal approval. Should this result in any changes, HR Committee will be updated.

4 Implications

- 4.1 No further implications.

5 Background Papers

- 5.1 Appendix 1 - Carer’s Leave Policy



**Somerset
Council**

Carer's Leave Policy

Organisation	Somerset Council
Title	Carer's Leave Policy
Owner	HR Policy Team
Primary Legislation	Carer's Leave Act 2023 Equality Act 2010

1. Policy Statement

- 1.1 Somerset Council acknowledges the difficulties employees face when balancing work commitments alongside caring responsibilities. Carer's leave is offered to enable employees to best manage their work/life balance.
- 1.2 Carer's leave provides employees with the opportunity to take one week (pro rata) of unpaid leave within any twelve-month period to care for a dependant with a long-term care need. Carer's leave may be taken in blocks of half days, whole days, or as one full week. The right to request carers leave is available to all employees from day one of employment.
- 1.3 If an employee with caring responsibilities requires further support than the one week (pro rata) unpaid leave provided in this policy a conversation with their line manager and a HR officer is advised. The [Carer Support Arrangement Form](#) may be a useful tool for this discussion.
- 1.4 This policy applies to all employees of Somerset Council with the exception of employees employed in Local Authority maintained schools where alternative HR policies, which have been subject to consultation and agreement with recognised professional associations and trade unions, are recommended for adoption by the individual school's Governance Board
- 1.5 This policy does not form part of the Somerset Council Terms and Conditions and may be subject to change.

2. Eligibility

- 2.1 An individual is considered a dependant of an employee if they meet one of the following criteria:
- are a spouse, civil partner, child, or parent of the employee,
 - live in the same household as the employee, (excluding boarders, employees, lodgers, and tenants),

- reasonably rely on the employee to provide or arrange care.
- 2.2 Somerset Council is aware that an individual an employee provides care for may not be a family member, and as such applications for carers leave will be considered on a case-by-case basis.
- 2.3 A dependant of an employee has a “long-term care need” if they meet one or more of the following criteria:
- they have an illness or injury that requires, or is likely to require, care for more than three months,
 - they have a disability meeting the criteria of the Equality Act 2010 (which causes a significant and long-term adverse effect on the person’s ability to carry out day-to-day activities),
 - they require care for a reason connected with old age.

3. Process for Requesting Leave

- 3.1 Requests for carer’s leave should be made to the line manager providing advance notice of either twice as many days as the period of leave required, or 3 days, whichever is the greater (wherever this is possible). Requests do not need to be made in writing but should include the start and end dates of the requested leave.
- 3.2 The line manager should then establish, through discussion with the employee, whether they wish to take the time off using annual leave, purchasing leave or flexible working arrangements, as an alternative to unpaid time off under this policy.
- 3.3 The line manager will reply as soon as possible after the employee’s request. Where carer’s leave is approved this must be recorded on SAP so that payroll is notified, and the appropriate pay can be deducted.
- 3.4 Where a line manager believes that the requested leave date(s) will be seriously detrimental to the provision of service, they can request that the employee changes the date(s) of the leave. In this scenario, the manager must provide the reason(s) in writing and provide alternative dates the leave can be taken on, within a week of the original request. The employee must be allowed to take their leave within a month of the original request. It is not possible to decline a request completely. In cases where the manager cannot approve the original request, HR Advisory should be contacted to provide advice.

4. During Carer's Leave

- 4.1 All terms and conditions under the contract of employment will remain, including the right to accrue paid leave and continuity of service. If an employee wishes, they can elect to pay pension contributions for the unpaid period of leave when they return to work in order that this period can be counted for pension purposes. Further information on this can be found in the [Pensions Policy](#) or by contacting [Peninsula Pensions](#).

Version History

Revision Date	Author	Version	Description of Revision
		1	New Somerset Policy

Somerset Council

Human Resources Committee
 - 26th March 2024

Somerset Council Employment Policies for Approval

Executive Member: Cllr Theo Butt Philip, Lead Member for Transformation and Human Resources

Lead Workforce Officer: Sari Brice, Strategic Manager – HR Practice

Author: Sarah Welland – Service Manager HR Policy & Projects

Contact Details: 01823 359882 sarah.welland@somerset.gov.uk

<i>Please complete sign off boxes below prior to submission to Community Governance</i>			
Report Sign off	Seen by:	Name	Date
	Legal	Jill Byron	04/01/23
	Corporate Finance	Nicola Hix	03/01/2024
	Human Resources	Dawn Bettridge	22/12/2024
	Executive Member	Theo Butt Philip	05/01/2024
	Monitoring Officer	David Clark	02/01/2024
Summary:	This report provides details of the policies for the new Somerset Council which are ready for consideration and if appropriate, approval, by the HR Committee. As agreed previously at HR Committee, policies meeting certain criteria (these are detailed below) would be presented to this Committee for consideration. Policies not meeting the criteria would be approved via delegated authority to the Service Director - Workforce.		
Recommendations:	<p>The members of the HR Policy Committee are asked to:</p> <p>Formally approve the new employment policy as detailed below which meets the previously agreed criteria and therefore requires HR Committee approval for use in the new Somerset Council.</p> <p>Note for information purposes only, the new policies listed below, which fall into the category of being a change to one or more of the former District Councils' existing policies, but have no significant change to the former SCC policy.</p>		
Reasons for Recommendations:	To ensure that key employment policies are in place for the new Somerset Council.		
Links to Priorities and Impact on Service Plans:	Part of the People Workstream for Local Government Reorganisation.		
Financial, Legal and HR Implications:	Financial – there are a handful of employment policies that have clear financial implications. As previously agreed therefore, any		

	<p>employment policies that have potential financial implications are being brought to HR Committee.</p> <p>HR – one clear set of employment policies, terms and conditions for new and existing staff. The new policies will apply to transferring staff where such policies are not contractual (i.e., have not been incorporated into the contracts of employment) and so do not fall within the protection provided under the Transfer of Undertakings Protection of Employment (TUPE) Regulations. Having a single set of HR policies will greatly assist line managers and staff and help define the organisation’s culture and values regarding our workforce.</p> <p>Legal – Where a contract of employment transfers to a new employer by virtue of the TUPE Regulations the employee’s terms and conditions of employment are protected despite the change of employer. This can sometimes result in a workforce where several different sets of terms and conditions apply.</p> <p>Changing terms and conditions can create risks of legal challenges particularly where employees are affected who have transferred under TUPE due to the protection afforded by the TUPE Regulations. To mitigate any such risks, consultation and negotiations will be carried out with Trade Unions to seek agreement to any changes.</p>
<p>Equalities Implications:</p>	<p>The Council’s duty under Section 149 of the Equality Act 2010 is to have “due regard” to the matters set out in relation to equalities when considering and making decisions. A full Equality Impact Assessment is being completed for each of the new employment policies.</p>
<p>Risk Assessment:</p>	<p>N/A</p>
<p>Scrutiny comments / recommendation (if any):</p>	<p>N/A</p>

1 Background

1.1 As agreed previously, any employment policy which meets one or more of the criteria below would be brought to the HR Committee for approval.

- a) Where there is a significant/notable change to the former SCC policy
- b) Something is contractual / is a term or condition.
- c) Where there is a cost implication – for example redundancy compensation scheme, sick pay, annual leave entitlement determination.
- d) Anything that the unions will not agree on/sign-off.

1.2 It was also agreed that any significant impact to any District Council partner's former policy is 'flagged' for the HR Committee's awareness.

1.3 All other policies will be approved via delegated authority, by the Service Director - Workforce.

1.4 Based on the criteria in 1.1 above, and highlighted in blue on the attached summary table at Appendix 1, the policy now ready for the HR Committee's consideration and if appropriate, approval are:

- Homeworking (appendix 2)

1.5 In addition, based on 1.2 above, and highlighted in yellow on the attached summary table at Appendix 1, are the policies where there is a significant impact or change to one or more of the District Councils' existing policies. As agreed, these are 'flagged' for HR Committee's awareness only. These are:

- Reservists (appendix 3)
- Volunteering (appendix 4)
- Career Breaks (appendix 5)
- Relocation Allowance (appendix 6)

2 Options Considered

2.1 An alternative option would have been to have not made any changes to these policies and, with effect from 1st April 2023, to operate under five different sets of employment policies. This option was discounted, and the current approach agreed for the reasons set out in HR implications above. The policies will not have retrospective effect.

3 Consultations Undertaken

3.1 These policies have been consulted upon informally with trade union representatives in weekly working group meetings and they have also been formally approved by the JNF (Joint Negotiating Forum).

4 Implications

4.1 The recommendations are made to ensure that Somerset Council has a set of employment policies in place which are legally compliant, fair, affordable and consistent with the values and culture of the new Council. If the Committee does not approve these policies, the former SCC policies will continue to be used, due to SCC being the continuing authority. This is with the exception of employees who TUPE transferred in from the District Councils and for whom existing terms and conditions are protected under the TUPE Regulations.

5 Background Papers

- 5.1 Appendix 1 - Summary table
- Appendix 2 – Homeworking Policy
- Appendix 3 – Reservists Policy
- Appendix 4 – Volunteering Policy
- Appendix 5 – Career Breaks
- Appendix 6 – Relocation Allowance

Summary Table for HR Committee March 2024

Key: **Blue** means a change to the existing previously agreed former SCC policy requiring approval by HR Committee.

Yellow means we have flagged for information / awareness as there is a change to one or more of the former District Councils.

Policy	Points to Note	Suggested Approval Route
Homeworking	<p>The homeworking policy applies only to those who have their home as their contractual base. The homeworking allowance has been increased to reflect the current HMRC amount of £26 per month (the current policy quotes the out-of-date amount of £18 per month). While this has a financial implication, there are currently only three employees within Somerset Council who are in receipt of the homeworking allowance. This is because the allowance is only paid to those who Somerset Council, as the employer, require to work from home. Where an employee successfully requests to become a homeworker and have their contractual work base amended to reflect this, the allowance is not payable.</p> <p>This policy does not apply to the majority of staff who now work in a hybrid/dynamic manner and who are covered by the dynamic working strategy and associated guidance (& who retain their original work base as their contractual place of work).</p>	HR Committee to approve due to amendment in homeworking allowance to reflect current HMRC rates.
Volunteering	<p>We are proposing to maintain the former SCC policy of 2 days paid leave per annum (pro rata) offered to all employees with managers' discretion for a further 3 days (total 5) pro rata.</p> <p>MDC offered 3 days (although didn't have much take up) and SWT offered 1 day. Please see below for data showing the number of days taken at SCC pre vesting day, and the number taken at Somerset Council between 1st April & 30th June 2023</p>	Flagged for information as a favourable change to one or more of the former District Council policies.

	<p>Volunteer Leave</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Paid (days)</th> <th>Unpaid (days)</th> </tr> </thead> <tbody> <tr> <td>19/20</td> <td>118</td> <td>0</td> </tr> <tr> <td>20/21</td> <td>23.3</td> <td>0</td> </tr> <tr> <td>21/22</td> <td>118</td> <td>0</td> </tr> <tr> <td>22/23</td> <td>136</td> <td>1</td> </tr> <tr> <td>Apr-Jun 23</td> <td>33.2</td> <td>0</td> </tr> </tbody> </table> <p>Groups that SCC/SC Staff have volunteered with include (amongst many others); AONB's, Schools, Libraries, St Margarets Hospice, Taunton Flower Show, Royal Air Force Charity, Poppy Appeal, 2BU, Carymoor, Fostering Panels, RSPCA, Baby Bank, Armed Forces Day, Samaritans.</p>	Year	Paid (days)	Unpaid (days)	19/20	118	0	20/21	23.3	0	21/22	118	0	22/23	136	1	Apr-Jun 23	33.2	0	
Year	Paid (days)	Unpaid (days)																		
19/20	118	0																		
20/21	23.3	0																		
21/22	118	0																		
22/23	136	1																		
Apr-Jun 23	33.2	0																		
Reservists	SDC, SWT, SSDC, and SCC all had policies on this. The most favourable amount of paid leave offered was 2 weeks per year (pro rata) for those attending camps from SCC. Unpaid leave is also offered where training cannot be undertaken outside of work hours and is at manager discretion. This amount of leave is what is expected to gain the Gold Armed Forces Covenant Status that SC is currently working towards.	Flagged for information as a favourable change to one or more of the former District Council policies.																		
Career Breaks	MDC's former policy enabled staff to request a career break for a minimum period of three months, whereas the other 4 predecessor organisations permitted requests for a minimum period of six months. We have therefore included a reference in the policy advising staff that they can apply for unpaid leave for shorter periods of time should they wish to do so.	Flagged for information as although a potentially less favourable change for former MDC staff, it is replaced by a different process (requesting unpaid leave).																		
Relocation Allowance	We have proposed to level up to the former SCC and two of the four Districts' approach and offer a maximum of £8,000. This is funded by the service and at service discretion.	Flagged for information as a favourable change from two former District policies.																		

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Somerset
Council

Home Working

Organisation	Somerset Council
Title	Home Working Policy
Owner	HR Policy Team
Primary Legislation	Flexible Working Regulations 2014 Equality Act 2010

1. Policy Statement

- 1.1. Somerset Council recognises the benefits of home working for both the employee and employer in the right circumstances.
- 1.2. The policy outlines the working arrangements that will apply when an employee works from home on a permanent basis.
- 1.3. This policy does not apply to dynamic working which is an informal arrangement whereby an employee chooses in agreement with their line manager to split their working time between their home and an office base. Please refer to the Dynamic Working Strategy. [Link](#)
- 1.3 This policy does not form part of the Somerset Council Terms and Conditions and may be subject to change.
- 1.4 This policy applies to all Somerset Council employees excluding school-based staff.

2 Responsibilities

2.3 Line managers' responsibilities:

- Ensure the employee has all the necessary equipment to enable them to carry out their work from home.
- Ensure that the employee has arrangements in place to meet all requirements under the Data Protection Act 2018 for the holding, storing and disposing of personal data.

2.4 Employees' responsibilities:

- Complete a home risk assessment and DSE assessment.
- Ensure they have adequate arrangements in place for holding, storing and disposing of personal data in compliance with the Data Protection Act 2018.
- Check with their insurance providers, mortgage or tenancy agreements, more information below.
- Not unreasonably refuse to work from an work base/office location as required (this includes attending a work base/office location for the purposes of meetings such as team meetings, etc).

- Ensure they take adequate rest breaks, as set out in the Working Time Regulations 1998:
 - Take an unpaid break of at least 20 minutes if working 6 hours or more per day/shift.
 - Ensure the time period between stopping work one day and beginning the next is not less than 11 hours: and
 - Have at least one complete day's break each week when no work is done.

3. Process

3.1 Under this policy, the employee is required by their contract of employment to undertake work from their home, even though they may spend part of their working time away from their home base. A nominal work base will be allocated solely for the purposes of claiming travel expenses.

3.2 Requests for homeworking will depend on whether or not the work can be done effectively from home. The Council cannot agree to all requests because every situation is different.

3.3 An employee may be a permanent home worker because:

- they have been recruited on the understanding that their normal contracted place of work and the majority of their working time will be their home, **or**
- a clear business reason has been identified and following consultation agreed,
- they were previously office based and it has been mutually agreed with their line manager to change their normal place of work to their home, as a result of:
 - a change in organisational requirements or
 - as a result of a redeployment or
 - a reasonable adjustment in line with the Equality Act 2010.
 - a flexible working request*

*An application for a contractual change to home working is made under the [Flexible Working Policy](#). The proposal/request must be completed in full to allow a full assessment to take place.

3.2 Working outside of the UK

3.2.1 The Council will not agree to home working on a permanent basis from a country outside of the UK. There are many implications of working outside the UK, including:

- tax and social security, we must set up a payroll in the country the employee is working.

- we would also need specialist advice on the employment legislation and health and safety laws of the country.
- information security issues.
- insurance implications.
- Whether attendance in the office/work base is required.

3.2.2 Working outside of the UK for a temporary period (less than 6 months) may be considered on a case-by-case basis, see 'Working outside the UK factsheet'. [link](#).

3.3 Childcare arrangements

3.3.1 In normal circumstances employees who have caring responsibilities are expected to have suitable arrangements in place during working hours. Home working is not a substitute for such arrangements. It is accepted that there may be temporary occasions when dependents are in the home, but the employee must still be able to carry out their duties without significant disruption. For example: if a child is ill or the child is of an age that they do not require constant supervision.

3.4 Dealing with Proposals/Requests for Home Working

3.4.1 In addition to the guidance under the Flexible Working Policy when considering a request for home working, (supplementary guides and checklists [\(add link\)](#) should be taken into account. For further advice and guidance contact the HR Advisory Team.

3.4.2 If the request is accepted the contractual variations including the work arrangements must be specified, which are outlined in the:

- Agree Flexible Working letter sent by line manager
- Home Worker Addendum to Statement of Written Particulars sent out by HR Admin and Payroll

4. Health and Safety

4.1 As an employer, Somerset Council must ensure the health, safety and welfare of all its employees, regardless of where they work. This includes employees who work at home.

4.2 Prior to formally agreeing that an employee may work from home, managers must be satisfied that the employee concerned is able to work in a safe and suitable environment. To assist line managers in this decision the following points must be considered:

- **Home Working Risk Assessment form**

Employees must complete this [form](#) and pass to their line manager to help determine the additional hazards and risks likely to be experienced by the home worker and to enable suitable and sufficient risk control measures to

be implemented.

- **Display Screen Equipment (DSE) Assessment**

A Display Screen Equipment (DSE) Assessment for the home must also be completed by the potential home worker using the Council's online DSE assessment system. Further information can be found at [Health & Safety HS 030 Display Screen Equipment Policy](#).

- 4.3 The Home Working Risk Assessment form together with the DSE assessment must be completed and all issues resolved through the implementation of control measures prior to the employee starting to work from home. In addition, Health and Safety elements should be reviewed at least once a year during the appraisal process.
- 4.4 All employees who work from home have a duty to ensure, insofar as is reasonably practicable, that they work in a safe manner and that they follow all health and safety instructions issued by the Council from time to time.
- 4.5 For further advice please contact the Corporate Health and Safety Unit (CHSU) on 01823 355089 or e-mail chsu@somerset.gov.uk.

5. Trial Period

- 5.1 As part of the assessment stage it should be determined whether a trial period is necessary. A trial period can be for between one to three months and can address any concerns before committing to a long-term arrangement. During the trial period it might be that little or no specialist equipment is required. In some cases the provision of a laptop may suffice. If some expensive items are required, a cost benefit analysis would need to be undertaken and other options considered.

6. Review

- 6.1 Following an initial review the employees' home working arrangements should be reviewed on a regular basis. It is recommended that it is discussed as part of the annual review process.
- 6.2 The purpose of the review is to ensure that the employee's working arrangements meet the demands of the service and the needs of the employee. The review will allow the manager and employee to discuss the working arrangements to ensure it remains suitable for both parties. This must include health and safety considerations and identification of any changes in circumstances that may result in the working arrangement being withdrawn temporarily or permanently.

7. Attending a Work Base

- 7.1 The employee will be required to attend work premises on a temporary basis as requested with reasonable notice and for whatever period necessary. Reasons for such requests may include accessing systems or equipment in the event of technical failure, staff shortages, collaborative working, peer support, submission of completed work and training.

8. Visits to the Employee's Home

- 8.1 Somerset Council reserves the right to visit an employee's home at an agreed time for work-related purposes, including health and safety matters. It is a condition of any homeworking agreement that the employee agrees to such visits.

9. Home Working Reimbursement of Expenses and Taxation

- 9.1 Where a permanent home working arrangement is as a result of a business led proposal, i.e. the Council requires the employee to work from home, employees who incur additional costs as a result of home working may be entitled to reimbursement. The rate payable by the Council is £26 per month non-taxable in line with HMRC rates (wef implementation date of policy). This payment will be calculated on a pro rata basis to the hours and weeks that the employee has worked at home. Managers should make a request to HRAP for payment to be made.
- 9.2 This reimbursement is not available to employees who choose to work from home via a flexible working request.**
- 9.3 The allowance is intended to contribute towards any additional costs that may be incurred e.g. for heating and lighting. It does not cover domestic expenses already being paid e.g. Council Tax. The employee is not entitled to tax relief for expenses that relate to both personal and business use e.g. telephone line rental or Internet access.
- 9.4 The above allowance is only claimable for working time spent at home. In the event of extended absence from home working (e.g. long term sickness, maternity leave) for a continuous period of one complete calendar month or more these expenses will be suspended. They will only resume on sustained return to fixed home working. This should be confirmed in writing using the template letters available on the HR&OD SharePoint site. On termination of employment or fixed home working arrangements the recurring expenses will cease in the last complete month (this will account for a handover period and return of Council property to take place prior to leaving). New starters will start receiving expenses from the date input by management. This would normally be after the induction period and issuing of appropriate

equipment to enable the home working arrangement.

- 9.5 Where an employee uses their internet home broadband for work purposes they will have to provide evidence of additional costs incurred and for which they have been charged to claim expenses. Expenses claims should be submitted through the normal process in the month the cost is incurred and will be paid in arrears.

10. Equipment/ Technology/ Furniture

- 10.1 The Council will provide essential equipment for use in the home to enable the fixed home worker to perform their role, for example an encrypted computer. Standard equipment and furniture for example a chair and an additional monitor can be requested via Assyst and collected from any Council office building. Delivery of items can be arranged for employees unable to collect.
- 10.2 In many cases existing home furniture can be used. Where additional furniture, such as a lockable cabinet or printer and shredder (if essential for the role), is required, this can be purchased through the Council's authorised supplier and will remain the property of the Council.
- 10.3 The employee must take reasonable care of their allocated equipment/ furniture. Reasonable wear and tear of equipment and furniture is accepted. The employee is responsible for ensuring reasonable measures are taken to protect Council equipment from inappropriate use, damage or theft. The employee should report any damage or malfunction to their line manager as it occurs. The Council at its discretion will replace such items as necessary.
- 10.4 Stationery and similar office material will be supplied through the normal Council procurement process. Reimbursement for payments made by the employee for such items will not be authorised.
- 10.5 All equipment, materials and furniture provided for home working purposes is provided for Council business and therefore is not liable for tax.

11. Telecommunications and Internet

- 11.1 In some situations it may be appropriate for an employee to be issued with a mobile telephone through an agreed contract provider. Managers should decide each case on its merits. Work devices are equipped with remote access facilities and phone/video access.
- 11.2 Employees, who use their personal home broadband service whilst conducting Council business, will be responsible for ensuring that such use is in accordance with the contract that they have with their Internet provider.

12. Security of equipment and data

12.1 Home workers must ensure the following arrangements are in place:

- Council equipment and information is stored securely.
- Council information, data and records cannot be accessed by family, friends, etc
- Any confidential waste is disposed of securely

12.2 For more information see [Information Governance policies](#).

13. Insurance

13.1 Somerset Council has the relevant insurance policies in place for the Council's actions and responsibilities.

13.2 It is the responsibility of the employee to inform their personal insurance provider(s) of their home working arrangement(s). All equipment supplied by the Council is covered under the Council's insurance policies. If an incident occurs please contact insurance@somerset.gov.uk

13.3 Employees should not meet with clients, including representatives of other agencies, at their own home address. Meetings for work purposes should be arranged in a Public or Council owned building.

14. Mortgages and Tenancy Agreements

14.1 Before employees start home working they will need to inform anyone with an interest in their property (e.g. landlords or mortgage provider) of their intention to work at home. They should ensure that there are no terms or conditions, leases or covenants, which prevent them from working from home. The employee will need to confirm to their manager that they have undertaken this prior to starting home working.

15. Nominal Work Base / Travel Base and Expenses

15.1 For all home working arrangements the Written Statement of Particulars and, if appropriate, the contract variation letter shall state the work base which will be the travel base for the purposes of claiming travel expenses. This includes any expenses incurred travelling to other work bases, where any additional mileage over the distance between the home and nominal work base can be claimed. Details are outlined in the Travel and Subsistence Policy – Procedures for Claiming Business Mileage.([link](#)) In addition to this, guidance on establishing a suitable allocated office/travel base can be found in the Home Working Manager Guide ([Link](#)).

16. Contact

16.1 Employees working from home:

- Should have a regular work update/supervision; this can be either through a visit to the office or online, as agreed by both parties.
- Should have the opportunity to meet with team colleagues at regular team meetings. As agreed within a Team Charter, see Dynamic Working Strategy.
- Should ensure that their calendar is kept up to date so it is clear when they are available.

16.2 Managers must ensure that employees maintain the same standards of security of information and equipment that would apply in the office.

17. Termination of a Home Working Arrangement

17.1 Circumstances may arise from either party's perspective that render continuation of the home working arrangement unsuitable.

17.2 Where a reasonable case is made and with adequate notice and consultation (a minimum of one calendar month unless mutually agreed otherwise) from either party, the home working arrangement may be terminated without prejudice to the employee's personal development or career progression.

17.3 If there is any disagreement about the termination of a homeworking agreement, please seek advice from the HR Advisory Service.

17.4 On termination of the employee's home working arrangement or employment for any reason, arrangements should be made to return all equipment, furniture and documentation belonging to the Council.

17.5 Such termination should be recorded formally in a statement and placed on the centrally held employee file.

Version History

Revision Date	Author	Version	Description of Revision
		1	New Somerset Policy

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Somerset
Council

Reservist Policy

Organisation	Somerset Council
Title	Reservist Policy
Owner	HR Policy Team
Primary Legislation	Safeguarding of Employment Act (1985) The Reserve Forces Act (1996)

1. Policy Statement

- 1.1 Somerset Council recognises the vital role of the Reserve Forces and the valuable contribution that Reservists make to Defence, their communities, and the workplace. As such the Council undertakes to support employees who are, and those who wish to become, Reserve Forces. Somerset Council therefore offers the following subject to the provisions set out in this policy:
- Agree to release Reservists for attendance at Reserve Forces Training events where these take place on normal working days.
 - Agree to the release of employees mobilised for Reservist duties.
 - Continue to uphold the contracts of employment for Reservists throughout any periods of mobilisation so that there will be no loss of continuous service or any service related benefits.
- 1.2 This policy does not form part of the Somerset Council Terms and Conditions and may be subject to change.

2. Declaration of Reservist Status

- 2.1 Reservists are required to inform their line manager that they are a member of the Reserve Forces and the force that they belong to. This is so that the Line Manager can provide the appropriate level of support to the Reservist. It also assists with resource planning during periods of leave for training and/or mobilisation.
- 2.2 Reservists are also required to grant permission for the Ministry of Defence (MoD) to write directly to the Council to confirm that they are members of the Reserve Forces. This ensures that the Council is made aware of the mobilisation obligations and rights of an employee; rights of an employer; and details of the financial assistance available if an employee is mobilised.

3. Leave for Training

- 3.1 The Reservist's Line Manager will endeavour to agree work patterns which allow attendance at annual camp and other training commitments unless there are exceptional service delivery circumstances. Somerset Council offers additional leave with pay for up to 10 days (pro rata) a year to enable Reservists to attend their annual camp.

- 3.2 Reservists can request paid leave from their normal annual entitlement to undertake additional short periods of training. Alternatively, they may request unpaid leave of up to three days per year provided such training cannot be undertaken in off-duty time and adequate notice is given.
- 3.3 Reservists should provide as much notice as possible to allow appropriate planning for absences. Permission once provided will not be rescinded unless there are exceptional circumstances (such as an Ofsted inspection).

4. Mobilisation

- 4.1 Mobilisation is the process of calling Reservists into full time service with the Regular Forces, to make them available for military operations. The period of mobilisation will depend on the nature of the operation and is typically no longer than 12 months.
- 4.2 In all cases of mobilisation, the Council will release the Reservist to report for duty unless there are exceptional circumstances, whereby the decision and reasoning will be explained to the Reservist.
- 4.3 In such circumstances, the Council has the right to seek exemption, deferral, or revocation if the Reservist's absence is considered to cause serious harm to service delivery.
- 4.4 Definitions of 'harm' will vary from case to case, but may include;
- Loss of reputation, goodwill, or other financial harm.
 - Impairment of the ability to provide services.
 - Harm to the research and development of services or processes (which could not be prevented by the granting of financial assistance from the MoD).
- 4.5 For guidance on seeking exemption, deferral, or revocation please consult the Reservist Guidance Document [\(add link\)](#).

5. MoD Responsibility During Mobilisation

- 5.1 During mobilisation the MoD will:
- Assume responsibility for the Reservists salary.
 - Pay a basic salary according to the Reservists military rank. If this basic element is less than the salary element the Reservist receives from the Council it is the Reservist's responsibility to apply to the MoD for the difference to ensure that they suffer no loss of earnings. This is known as a Reservist Award.
 - Provide five days of handover costs before the Reservist is mobilised and on their return to work.

5.2 Benefits

- 5.2.1 All contractual benefits that are suspended by the Council during mobilisation

can be claimed by the Reservist as part of their Reservist Award.

5.3 Pension

5.3.1 If the Reservist is a member of the Local Government Pension Scheme (LGPS) they can choose to remain in the scheme during the period of mobilisation. For this to happen; the Reservist will need to provide the MoD with their LGPS pension payment details. To obtain this information the Reservist can contact HR Admin & Payroll who will advise them of their assumed pensionable pay and the amount of employee and employer contributions. The MoD will pay the employer's contributions and arrange for the Reservist's contributions to be deducted from their pay.

5.4 Annual Leave

5.4.1 Reservists should be encouraged to take any accrued annual leave before mobilisation. Reservists accrue annual leave with the MoD whilst they are in full time service, as such the Reservist does not accrue annual leave with the Council during this time. When they demobilise, Reservists are entitled to a period of post-operational leave during which they will be paid by the MoD.

5.5 Dismissal/Redundancy

5.5.1 A Reservist's employment cannot be terminated on the grounds of their military duties or their liability to be mobilised.

5.5.2 In cases of restructures, Reservists can be included in the redundancy pool. However, redundancy criteria must not include an employee's responsibilities as a Reservist as grounds for redundancy.

5.6 Sick Pay

5.6.1 During the period of mobilisation any service related sick pay will continue to accrue. Should the Reservist become sick or injured during mobilisation they will be covered by the MoD healthcare arrangements (including pay) until they are demobilised. If the sickness or injury continues and this results in early demobilisation, the Reservist will remain covered by the MoD until the last day of paid military leave. After this time the Reservist will be covered by the Council's sickness policy.

6. Reinstatement

6.1 There is a legal requirement under the Safeguarding of Employment Act 1985, for a Reservist to be re-employed for a minimum of 13, 26 or 52 weeks, depending on their length of employment prior to mobilisation, as follows;

Length of service	Minimum period that the employer is obligated to reinstate after mobilisation
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If the employee has been in continuous employment for a consecutive period of less than 13 weeks	Must reinstate the employee for a minimum of 13 weeks
If the employee has been in continuous employment for a consecutive period of more than 13 weeks and less than 52 weeks	Must reinstate the employee for a minimum of 26 weeks
If the employee has been in continuous employment for a consecutive period of not less than 52 weeks	Must reinstate the employee for a minimum of 52 weeks

- 6.2 The Reservist must contact the Council by the third Monday after their last day of military service making their request to return to work and suggesting a date of return (within six weeks of their last day of full-time service). This must be made in writing for it to be valid under the Reserve Forces Act.
- 6.3 The Council must reinstate the Reservist employee, where possible to their former role. If this is not possible because of organisational change the Reservist must be offered an alternative position of equivalent terms and conditions.
- 6.4 If the Reservist is not happy with an offer of alternative employment, they must contact their Line Manager stating why there is reasonable cause for them not to accept it. The Line Manager must then contact HR Advisory for advice.
- 6.5 If a Reservist believes that the Council's response to their concerns denies their rights under the Safeguard of Employment Act 1985, an application can be made to a Reinstatement Committee for assessment and where appropriate a Trade Union Representative may be involved. This committee will consider the Reservist's application and can make an order for reinstatement and/or compensation.

Version History

Revision Date	Author	Version	Description of Revision

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Volunteering Policy

Organisation	Somerset Council
Title	Volunteering Policy
Owner	HR Policy Team
Primary Legislation	

1. Policy Statement

1.1 Somerset Council is keen to encourage and support employees to undertake volunteering opportunities, recognising the benefits that this can bring to both employees and the wider community. As such all employees (apart from those employed by schools who are employed under a Governing Body's delegated powers) are offered 2 days paid volunteering leave per year on a pro rata basis. This can be increased by a further 3 days to a maximum of 5 days at the manager's discretion.

1.2 To receive paid volunteering leave employees must be taking part in activities which benefit at least one of the following:

- the environment
- individuals and residents of Somerset*
- charities and community groups
- the Chairperson's Charities
- organisations which are 'not for profit'

* To benefit Somerset communities the volunteering should take place in Somerset, with flexibility for employees who live further afield to volunteer closer to home. This policy does not apply to volunteering outside of the UK.

1.3 If an employee or manager is unsure whether the volunteering activity or organisation involved is covered by this policy, please contact the Central Volunteering Team (Volunteer@Somerset.gov.uk).

1.4 This policy does not form part of the Somerset Council Terms and Conditions and may be subject to change.

2. Principles

2.1 All employees have the right to request time off during work hours to volunteer but there is no automatic right to time off work to undertake volunteering. The needs of the service must be treated as a priority and the employee must obtain agreement to take volunteering leave before making any commitments

to a voluntary organisation.

- 2.2 Time taken to volunteer should not disrupt or adversely affect individual or team activity. Volunteering should not involve a visible financial cost to 'back-fill' staff cover. If it does, then a manager can make the decision not to approve a volunteering request.
- 2.3 If an employee believes that their request(s) for volunteering leave are being unfairly rejected by their line manager they are asked to raise this with a higher manager or HR Advisory.
- 2.4 The volunteering activity must not bring the Council into disrepute and must not create a conflict of interest with the employee's substantive role. The employee must make known to their line manager anything that they think may constitute a conflict of interest prior to entering into the agreement or (if it becomes apparent later), at any time during the agreement. Guidance on what constitutes a conflict of interest can be found in the Standards of Conduct policy ([add link](#)) and the Financial Regulations ([add link](#)).
- 2.5 Managers need to consider what personal gain the employee will get from the volunteering activity and whether they will receive a significant financial benefit in return for the volunteering activity and how this may be viewed by the public. If the employee is set to gain a significant financial benefit it may not be appropriate to provide paid time off work.
- 2.6 Requests for time off to volunteer must be sent to the line manager at least two weeks in advance of the volunteering activity taking place. Once an agreement has been entered into, the Council undertakes to release the employee as per that agreement. Only in very exceptional circumstances will the Council seek to alter or withdraw from the agreement.
- 2.7 Volunteering time can be used flexibly subject to needs of the service, one day at a time, two together, or broken down into hours to fit the needs of the activity and the type of volunteering. Paid time for volunteering only applies to volunteering which is performed within normal working hours.
- 2.8 Any abuse of the Employee Volunteering Policy may lead to disciplinary action.

3. Exceptions to this policy

- 3.1 This policy does not apply to volunteering that involves campaigning on behalf of, or promotion of any of the following types of groups:
 - Political parties or groups involved in activities of a political nature
 - Religious groups

- Groups involved in illegal activities.
- 3.2 If there is any doubt as to whether a proposed volunteering opportunity falls into any of the above categories **HR Advisory** should be consulted.
- 3.3 This policy does not cover the activities listed below as there are specific arrangements for volunteering associated with public duties which can be found in the Special Leave Policy or Reservist Policy (**add links**).
- Public Bodies' Activities (governors/magistrates)
 - Election Duties
 - Census Duties
 - Candidates for Election to Parliament
 - Candidates for Election to Local Authorities
 - Retained Fire-fighters
 - Armed Service Reservists
 - Scout and Guide Group Leader
 - Participation in and delivery of the Duke of Edinburgh's Award Scheme (except for the volunteering element which may be taken under this policy)
 - Route1 Advocacy

4. Application for & Recording of Volunteer Time

- 4.1 Following discussion with their line manager, the employee should request the time off via ESS, choosing the 'Volunteer (paid) Leave' option. If the employee does not have access to ESS they will need to complete the Volunteering Request Form (**add link**).
- 4.2 Once the line manager has authorised the time off via SAP or after receiving the form, all employees should record their volunteering on the online Volunteer Monitoring Form (**add link**).

5. Use of Council Property & Expenses Claims

- 5.1 The Council will not offer the use of any of its property for volunteering reasons and therefore expects the organisation with which the employee is volunteering to provide any necessary items. Likewise, the Council will not cover any expenses incurred through volunteering for other organisations. Any expenses should be claimed through the organisation with which the employee is volunteering.

6. Liability

- 6.1 The Council will not be liable for damages or injuries that occur through

volunteering for other organisations. It is the employee's responsibility to ensure the organisation they are volunteering with has their own health and safety policy and the appropriate insurance policy. The Standards of Conduct ([add link](#)) continue to apply to employees when volunteering. The code contains provisions that encourage the highest standards of integrity and personal conduct on the part of all employees.

Version History

Revision Date	Author	Version	Description of Revision
		1	New Somerset Policy

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**Somerset
Council**

Relocation Allowance Policy

Organisation	Somerset Council
Title	Relocation Allowance Policy
Owner	HR Policy Team
Primary Legislation	

1. Policy Statement

- 1.1. This policy applies to new appointees to the Council on a permanent or fixed term contract of more than 2 years and existing employees who are required to move home as consequence of a new role. The new residence must be within a reasonable daily travelling distance of the new workplace.
- 1.2. The allowance is not payable if the employees' partner or other member of their household is in receipt of a relocation package from another organisation.
- 1.3. It sets out what can be claimed tax-free in accordance with HMRC rules on relocation costs when moving home to take up a new post.
- 1.4. This policy does not form part of the Somerset Council Terms and Conditions and may be subject to change.

2. Relocation Allowance

- 2.1. The relocation allowance is offered as a sum up to a total of £8,000 inclusive of VAT and is tax free as long as it is to reimburse for costs associated with moving the main living residence as defined by **HRMC qualifying costs**. The relocation allowance is paid from the service areas budget.
- 2.2. **Advance Allowance**
 - 2.2.1. To assist an employee to meet the immediate costs incurred in moving **their main residence**, an advance of up to £2,500 out of the relocation allowance may be paid on the first day of employment. An advance amount may be paid in advance of the first day of employment to migrant workers from overseas to help with the significant costs of relocating from abroad.
 - 2.2.2. It is important to stress that the 'advance' must be accounted for by the individual; at the end of six months if employee's expenses are less than the advance or employees are unable to account for it, the excess will be reclaimed.
 - 2.2.3. The advance should be arranged using form ESU60. This will enable a BACS payment to be arranged on or shortly after the employees first day at work. Managers must ensure that a copy of the form is retained so that the employee can sign to acknowledge receipt of the payment and sign the [Relocation Certificate of Undertaking](#).
 - 2.2.4. Further claims and the list of expenditure to account for the advance should also be submitted on form ESU60.

2.3. Qualifying Costs

2.3.1. Qualifying costs should fall into one of the following categories, this list is not exhaustive:

2.3.2. Sale or intended sale of old residence and/or purchase or intended purchase of new residence

- Estate agent fees.
- Legal fees and other professional fees and charges arising out of housing transactions.
- Disconnection and reconnection of domestic appliances and gas fires and fittings.

2.3.3. Transporting belongings

- Removal costs of personal effects and furniture between residences.
- Temporary storage of personal items where there is not a direct move from the old residence to the new.

2.3.4. Travelling and subsistence

- Travel allowance based on standard return rail fare once a week to the employee's former home (up to 26 weeks is usually considered reasonable).
- Travel and one overnight stay and subsistence for the employee and partner (and children) to search for new accommodation.
- Temporary accommodation rental costs where two homes (one in the old area and a temporary one in the new area) are being maintained. In the case of an employee whose family move into rented accommodation, they can continue to claim the costs if the present family home remains unsold. Where temporary accommodation costs are payable it is expected that the employee will purchase a property in the new area at the earliest possible moment. From time to time the Line Manager will enquire as to the steps being taken by the employee towards this end.

2.3.5. Domestic goods for the new residence

- Replacement of white goods if unsuitable for new residence. For example: an electric oven to replace gas cooker where no gas supply.

2.4. Senior Managers may authorise reimbursement of other costs incurred that are not included in the HMRC exemptions but are reasonable and justifiable expense. The payment of such items will be subject to normal tax and NI deductions and still within the limit of £8,000.

2.5. Interest on Bridging Loans

2.5.1. The interest on Bridging Loans may also be funded from the £8,000 relocation allowance if:

2.5.2. The loan does not exceed a reasonable estimate of the market value of the old property

2.5.3. The loan bridges an unavoidable gap between the date expenditure is

incurred on the purchase of the new property and the date on which the sale proceeds of the old property are received

- 2.5.4. The loan must be used only to pay off the mortgage on the old property, to fund the purchase of a new property or to meet immediately related incidental expenditure (e.g. legal or survey fees)
- 2.5.5. The interest payments must be made for no more than 12 months
- 2.5.6. Employees must produce evidence of the payments; a statement from the bank showing interest paid would act as evidence

2.6. Conditions

2.6.1. Where the employee has already sold their main residence / is in the process of selling, before a job offer is made, they will not be able claim expenses incurred in selling this residence.

2.6.2. Original receipts must be provided wherever practicable for all the allowances listed above.

2.6.3. Time limit

2.6.3.1. It is expected that employees will have relocated within 12 months of appointment. Senior Managers have discretion to reimburse expenses outside this time limit up to the maximum relocation allowance.

2.6.3.2. HMRC stipulate their own time limit for the employee to qualify for tax free reimbursement. Therefore, the expenses must be incurred, or the benefits provided, before the end of the tax year after the one in which the employee's circumstances changed. Any expenses claimed outside the HMRC time limit would be paid but would not be tax free. In this situation the manager should contact HR Admin and Payroll for further advice.

2.6.4. Repayment

2.6.4.1. The employee must stay in the Council's employment for at least two years, if they fail to do so they must refund to the Council one twenty fourth part of the total sum granted for each unexpired month or part month of the two year period. The Certificate of Undertaking should be issued and signed before payment of the allowance.

Version History

Revision Date	Author	Version	Description of Revision
		1	New Somerset Policy

Agency staff update

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26th March 2024



Somerset
Council

Agenda Item 6

Overview of agency use across the Council

The Establishment & Recruitment Control Board (ERCB) was set up in November 2023 as part of spend control measures. This has resulted in fewer starters than leavers in each of the 4 months since.

Close monitoring of agency spend has continued to ensure control of the establishment does not have a corresponding increase in agency spend.

Authorisation of new agency placements and extension of existing placements beyond the initial term is controlled via ERCB.

Impact of ERCB

Since the establishment of ERCB there has been a reduction in the number of directly employed staff in the organisation of 85.

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	Nov-23	Dec-23	Jan-24	Feb-24	Total
Starters By Month	47	21	33	18	119
Leavers By Month	56	55	52	41	204

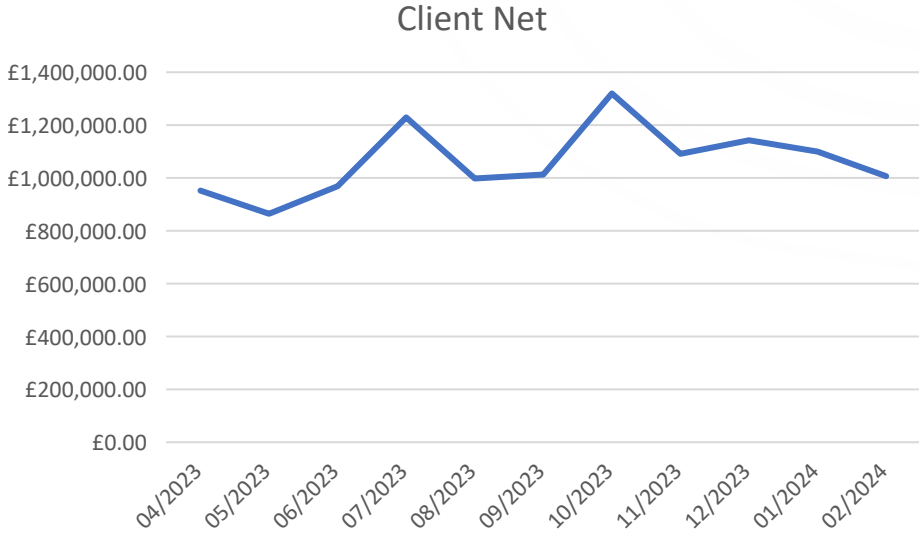
Summary of matrix spend

- The agency spend via matrix YTD is £11,684,552.
- Average monthly matrix spend April 23 – October 24 is £1,049,213
- Average monthly matrix spend November 24 – February 24 is £1,085,013.
- While this shows a small increase, there is no evidence of a spike in agency spend as a result of the ERCB controls.

Trend of matrix spend (YTD)

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Month	Client Net
04/2023	£952,041.22
05/2023	£864,369.05
06/2023	£968,678.66
07/2023	£1,229,037.07
08/2023	£997,922.29
09/2023	£1,012,869.72
10/2023	£1,319,579.13
11/2023	£1,091,269.24
12/2023	£1,142,531.00
01/2024	£1,099,649.21
02/2024	£1,006,605.52
Grand Total	£11,684,552.11



Summary of matrix spend

- The total number of agency placements since the launch of ERCB has started to reduce when compared to the average for the year.

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Directorate	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sept-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Average
Adults Services	40	42	46	50	53	56	68	64	59	47	53	53
Children & Family Services	48	47	49	51	48	43	44	43	44	44	41	46
Climate & Place	37	39	42	46	45	46	45	43	41	35	36	41
Community Services	46	60	62	64	57	57	57	52	45	35	35	52
Public Health	3	2	2	3	2	3	3	3	3	1	2	2
Resources & Corporate Services (s151)	26	24	21	19	20	20	20	18	16	10	10	19
Strategy Workforce & Localities	25	22	22	20	20	20	21	18	15	15	15	19
Grand Total	225	236	244	253	245	245	258	241	223	187	192	232

Off-contract Spend

- Work has been undertaken since the placing of the matrix contract to encourage agencies currently in use across the council who are not already registered with matrix to do so.
- Many agencies have done so but there remain a number of agencies that are not registered.
- Placements that are not through matrix are managed within the relevant service. This prevents accurate oversight of total agency spend and work is being undertaken to create a central list to address this.

Time for Questions

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Helen.Thomas@somerset.gov.uk

Vacancy Update

- A new report run in Feb 2023 had a Somerset Council position FTE of 5415.80
- Employees in post 4547.99 FTE, Vacant 821.73 FTE
- 990 positions were showing as vacant

As at 11/03/24 the following has been identified:

170 vacancies, 84.47 FTE have been removed from the structure as unbudgeted

331 vacancies, 389.78 FTE have been identified as budgeted, 18 of these do not match the budget (+&-)

389 vacancies, 347.48 FTE are still being actively analysed by Finance

236 positions were filled by agency staff, 149.51 FTE

Once this work is completed a new report will be run and the intention is to use this to match the HR and Finance data to identify and understand vacancies. This will support future Establishment Control work and there will be an ongoing monthly exercise to enable the current establishment position to be available at all times

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Workforce Update

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HR Committee 26.03.24

Dawn Bettridge Interim Service Director
Workforce



Somerset
Council

Agenda Item 7

Workforce Programme - priorities

1. Workforce reduction and restructuring

1. Various pay-bill reduction interventions including a Voluntary Redundancy Scheme to help close the 25/26 budget gap by c £40m by April 2025
2. Whole Council restructuring from top to bottom by December 2024
3. Close working with the Organisational Design programme on the Target Operating model, design principles, and Service Blueprints
4. Revised Organisational Change process (restructuring) for consultation
5. Trade Union engagement, consultation and negotiation
6. MTFs – Business Partners and HR advisory - managing the people impact
7. LGR restructuring – supporting 5 services complete to Tier 5
8. Devolution – managing the people impact (TUPE)
9. Property Rationalisation – advising and supporting on the workforce impact

Workforce Programme priorities

2. Organisational Development and Supporting people through change

1. New values and behaviours launched Dec 23 – shaping cultural change
2. Full year programme of activity including management and leadership development, talent management, workforce planning
3. Improve the employee experience – from hire to retire
4. New performance appraisal system – continuous conversations – April 2024
5. Staff Wellbeing strategy and programme
6. Programme of tailored support for all staff - whether leaving or remaining
7. Outplacement support and employability skills
8. Employee engagement – staff survey
9. Understanding skills and building capability – creating an agile workforce and a talent tool for easier deployment of staff
10. Employee Value Proposition – reviewing our employee benefits

Workforce Programme priorities

3. Pay, Grading and Total Reward

1. Job Evaluation project and Planning Service Workforce Strategy & Plan
2. Spans and layers and equal pay diagnostics (external review)
3. New Pay and Grading framework for April 2026
4. Non-financial reward and recognition schemes

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4. Workforce Data, Insight and Analytics – to support the Transformation and Improvement programme

1. New workforce KPIs – measure what matters – April 2024
2. Data-led workforce decision making
3. Voluntary redundancy BI report
4. Data modelling to inform Council restructuring

Workforce - BAU focused activity

- Workforce Service Restructure 2024 – smaller, redesign & restructure
- Somerset Council People Strategy 2024-26
- Payroll and HR Admin – new HR IT system required to replace SAP
- Establishment and Recruitment Control Board – managing spend
- DBS – outsourcing to existing provider in 2024 (safeguarding)
- Recruitment and retention – targeted interventions
- Project focussed on off contract agency spend (with finance and procurement)
- Skills and talent development
- Mandatory Training – new modules
- Improve induction and introduce a manager's induction
- Coaching skills for Managers
- Inhouse Graduate Development Programme
- Early Careers and Apprenticeships

Celebrating success – progress update

- ✓ Workforce interim structure in place delivering transformation, improvement and BAU
- ✓ Workforce programme structure, governance, resources & PIDs in place
- ✓ Workforce Programme (Transformation) High Level Business Case and EIA endorsed by Executive 7/2/24
- ✓ Launched VR scheme on 9/2/24 – closes 24/3/24
- ✓ Launched new staff values and behaviours – Dec 2023
- ✓ LGR Restructuring programme completed to Tier 4, currently supporting 5 Service Directors restructure to Tier 5
- ✓ Essential HR Policy updates and H&S policies in place
- ✓ Improved Trade Union relations and engagement
- ✓ HR Business Partners & HR Advisory teams supporting leaders with organisational change, recruitment and employee relations casework
- ✓ Workforce Budget MTFP savings £200k 23/24

Dawn.Bettridge@Somerset.gov.uk



Somerset
Council

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Somerset Council

Human Resources Committee

– Tuesday 26 March 2024

Approval Process for Somerset Council Health and Safety Policies

Executive Member: Cllr Theo Butt Philip - Lead Member for Transformation and Human Resources.

Lead Workforce Officer: Sari Brice - Strategic Manager HR Practice.

Author: Daniel Thomas – Strategic Manager Health and Safety.

<i>Please complete sign off boxes below prior to submission to Democratic Services</i>			
Report Sign off	Seen by:	Name	Date
	Legal	David Clark	05/12/2023
	Corporate Finance	Nicola Hix	22/01/2024
	Human Resources	Sari Brice	21/12/2023
	Executive Member	Theo Butt Philip	21/12/2023
	Monitoring Officer	David Clark	05/12/2023
Summary:	<ul style="list-style-type: none"> The Food Safety Policy At the June Health, Safety, and Wellbeing Steering Group Jo O'Callaghan (Strategic Manager Education Ops) queried the ownership of Somerset Council's Food Safety Policy. It was noted that although published on the H&S Website, the policy was drafted by a disbanded group, as such, the policy hasn't been updated in several years and was deemed not fit for purpose. Subsequently it was agreed H&S would work with the SSE Senior Catering Advisor to review and update the policy. The main objectives for the review were to include the latest allergen advice for PPDS foods (pre-packed for direct sale) also known as Natasha's law. It was also felt that clarification was needed to explain who in the Council the Food Safety Policy was aimed at. In the opening paragraph 'Policy on a Page', examples have been added of school meal provision, library cafes, outdoor centres, and the local pantry network. Other changes to the policy are the Devon and Somerset trading standards are now called the Heart of the Southwest trading standards service. Following unitary, citations of District Council officers have been changed to Food Safety Officers from Somerset Council's Environmental Health team. References have been removed for the Somerset Council 		

Food Safety Group as this no longer exists. The policy has also been split into two parts, policy and a separate guidance document.

Review of the draft policy has been undertaken by Natalie Spicer, Senior Catering Advisor, Contract Support Service (Schools), Rachael Holden, Group Manager at the Heart of Southwest Trading Standards Service and Emily Vining, Public Health Manager and Lead. Prior to bringing this policy to HR Committee, the council's LGR JNF Group and Health, Safety, Wellbeing Steering Group were consulted, there were no requests for further changes from either group.

- **The Legionella Policy**

This was a review of the legacy County Council Legionella Policy. Compliance specialists representing Strategic Asset Management and Housing Services were involved in the review.

Responsibilities and procedures specific to Housing Services were added to the policy.

Timescales were established for addressing identified risks arising from Legionella Risk Assessments published by external competent contractors pertaining to the management of our strategic assets.

- Remedial work identified as high risk to be actioned within 20 working days of report being issued to Somerset Council
- Remedial work identified as medium risk to be actioned within 40 working days of report being issued to Somerset Council
- Low risk works are for awareness/ periodic review only.

References and responsibilities were added pertaining to the Legionella Working Group. The Group was established by Strategic Asset Management to maintain an ongoing dialogue around legionella issues.

Legionella risk assessment review periods were extended by 12-months, this change was requested by Strategic Asset Management, a risk-based rationale was provided and approved by the Council's designated Responsible Person Oliver Woodhams. Updated frequencies are captured on page 23 of the Legionella Guidance document.

- **The Slips and Trips (Same Level Falls) Policy**

This was a review of the legacy County Council Policy. The Slips and Trips (Same Level Falls) Policy outlines Somerset Council's aims to conduct its activities so that no person suffers harm whilst

	working in or moving around premises and other work environments which are the responsibility of the Council. Changes to the Council's current policy were deemed minimal, with no significant change in established practice.
Recommendations:	Members of the HR Committee are asked to approve and confirm the following H&S policy reviews: <ul style="list-style-type: none"> • Food Safety Policy • Slips and Trips (Same Level Falls) Policy • Legionella Policy
Reasons for Recommendations:	Section 2(3) of <i>The Health and Safety at Work etc Act 1974</i> places a statutory duty on Somerset Council to prepare a written health and safety policy. The policy must be revised as necessary and be brought to the attention of employees. Owing to the Local Government Reorganisation, a review is necessary to ensure the newly formed Somerset Council has outlined its commitment, aspirations, and arrangements regarding the management health and safety within the organisation.
Links to Priorities and Impact on Service Plans:	Part of the People Workstream for Local Government Reorganisation.
Financial, Legal and HR Implications:	<p>Financial – Broadly speaking there are no unforeseen financial implications associated with the health and safety policies. Each of the five local authorities had a statement of intent and policy arrangements which outline a commitment to manage its activities in a safe and legally compliant manner, so far as is reasonably practicable (SFAIRP). There is of course a cost associated with that endeavour, however it's a well-known and understood legal requirement.</p> <p>Specifically, The Statement of Intent states <i>“so far as is reasonably practicable, the Council will strive to attain the highest possible standard of health and safety (H&S) management in all its operations”</i></p> <p>Therefore, in seeking to achieve the highest possible standards of health and safety, SFAIRP enables the council to assess the degree of risk against the financial cost, time, effort and impact associated with managing the risk.</p> <p>HR – The new policies being drafted will apply to all employees regardless of whether they have transferred into Somerset Council or have remained employed by the continuing authority.</p> <p>The requirements placed on employees will be in accordance with statutory duties placed on them under Section 7 of <i>The Health and Safety at Work etc Act 1974</i>. Policies are subject to trade union consultation, and review by the Health, Safety, and Wellbeing Steering Group, thus ensuring the impact of each</p>

	<p>policy review is scrutinised to ensure expectations placed on employees are reasonable.</p> <p>Legal – Health and Safety Policies are reviewed to ensure Somerset Council remains compliant with legislative requirements.</p>
Equalities Implications:	<p>The Statement of Intent commits Somerset Council to ensuring the provision of a workplace where employees feel safe, supported, and free to raise concerns and feel included regardless of race, religion, gender, political beliefs, or abilities.</p> <p>The Council’s duty under Section 149 of the Equality Act 2010 is to have “due regard” to the matters set out in relation to equalities when considering and making decisions. Following consultation with Somerset Council’s Equalities in Employment Officer, where required, a full Equality Impact Assessment will be completed for Health and Safety policies.</p>
Risk Assessment:	N/A
Scrutiny comments / recommendation (if any):	N/A

Background

Local Government in Somerset was reorganised with the formation of a single unitary authority covering the work of the County Council and four District Councils (Mendip, Sedgemoor, Somerset West & Taunton, and South Somerset). Owing to the forming of Somerset Council, work has begun to review and consolidate health and safety policies from across the five local authorities.

In consultation with the LGR JNF trade Union Group and People Workstream, in August 2022 it was agreed existing County Council H&S policies would supersede district policies. It was also agreed that reviews of SCC policies would include a comparison of district policies.

For each policy a fundamental set of principles are being applied – (i) that they are legally compliant, (ii) align with best practice and (iii) are as concise and user-friendly as possible. Where possible, detailed process and guidance is being moved into guides/supporting documents to assist with keeping the policies as concise as possible.

Policies under review are examined by health and safety professionals from across the former five organisations before a newly drafted policy is then issued to Trade Unions for consultation.

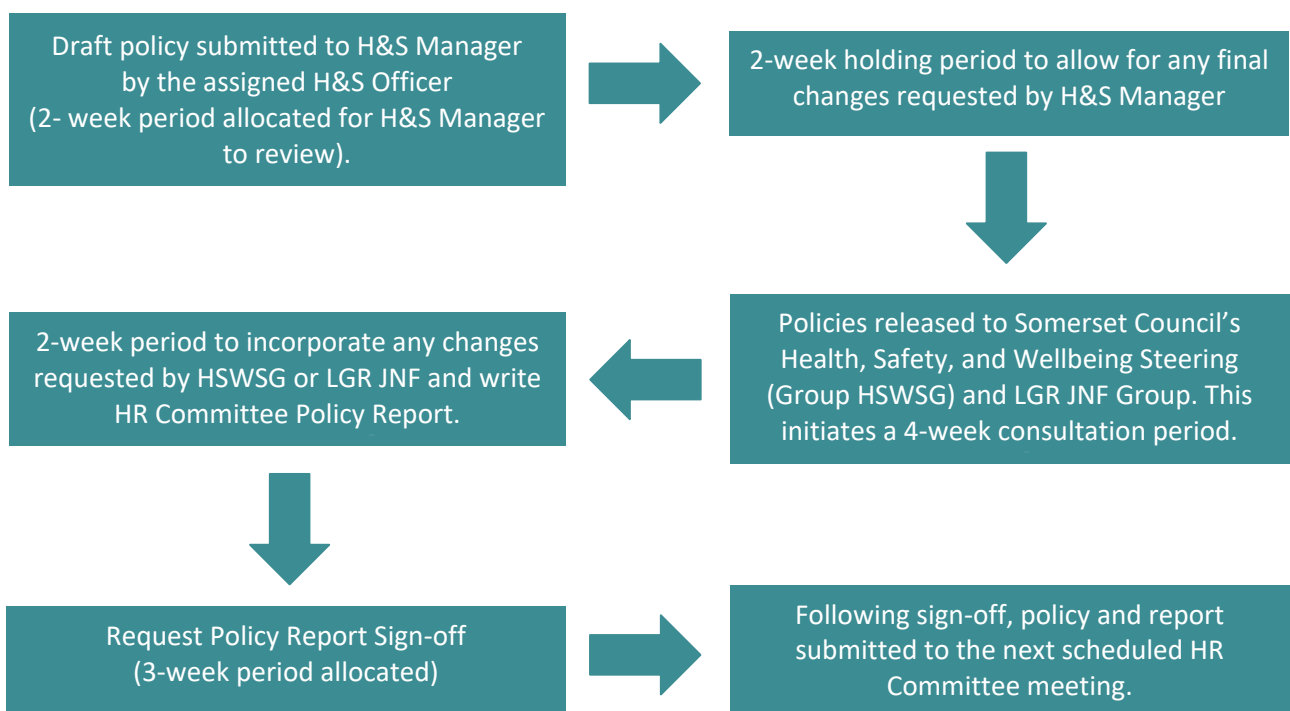
In addition to the trade union consultation, policies are submitted to the Council’s Health, Safety, and Wellbeing Steering Group (HSWSG). Membership of the HSWSG captures representatives from across the Council’s seven directorates. This includes a mixture of Trade Union

appointed H&S Representatives, Service Directors, Strategic and Service Managers.

Once policies have been through the consultation process, policy approval is requested from Chair of the Health, Safety, and Wellbeing Steering Group (Alyn Jones) and the elected member portfolio holder (Theo Butt Philip).

Policy Approval Process

The Health and Safety Service has established a policy review [forward plan](#) which we have aligned with HR Committee meetings to ensure drafted policies are brought to the attention of HR Committee prior to being published. The process followed is outlined below.



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**Somerset
Council**

HS25 Slips and Trips (Same Level Falls) Policy.

Organisation	Somerset Council
Title	HS25 Slips and Trips (Same Level Falls) Policy.
Author	Jo Coles
Owner	The Corporate Health and Safety Unit
Protective Marking	Official – Unclassified
Primary Legislation	Health & Safety at Work Act 1974 Workplace (Health, Safety and Welfare) Regulations 1992

Policy on a Page

Somerset Council (SC) will ensure through this policy document that incidents from Slips and trips are reduced to as low as reasonably practicable.

The Council will provide appropriate arrangements for the provision and management of walkways, stairs, and pathways under its control. These measures will ensure that, ‘as far as reasonably practical’, all pedestrianised areas/access/egress routes etc, that the council is responsible for are maintained in a safe condition for the benefit and safety of staff & visitors.

Footwear needs to be sensible and suitable for the work activities and the working environment. High, fine heels, open toe shoes and shoes which give little support are unlikely to be appropriate.

Managers will conduct risk assessments for activities undertaken by their service which may highlight the need for the provision of specific protective footwear, provided to employees and volunteers as Personal Protective Equipment (PPE). Further information pertaining to the assessment and provision of PPE can be found in Somerset Council’s HS013 Personal Protective Equipment Policy ([link required prior to publishing](#)).

This document and associated guidance will be available to: **All Elected Members, Somerset Council Staff, and Volunteers.**

Key Messages

- Somerset Council (SC) aims to conduct its activities so that no one suffers harm whilst working in or moving around premises and other work environments which are the responsibility of the Council.
- Any reference to falls in this policy applies to falls from the same level. For further guidance on falls from one level to another visit SC HS27 Working Safely at Height Policy ([link required prior to publishing](#)).
- Slips, trips and falls to members of public on the Highway Network are not applicable to this policy. Defects pertaining to Somerset Council’s Highway Network can be reported [here](#).

This “policy on a page” is a summary of the detailed policy and guidance documents, please ensure you read, understand, and comply with the arrangements stated.

Responsibilities

Somerset Council	Directors and Delegated Senior Managers
Premises Managers or those in control of premises	Strategic Asset Management
Managers	Employees
The Corporate Health and Safety Unit	Other Information and links

Somerset Council will:

- Ensure that, through design of its premises, its management of them, and supervision of staff, that workplace risks from slips and trips are reduced so far as is reasonably practicable.
- Where specific risks exist that cannot be controlled by other means, the Council will provide special footwear as Personal Protective Equipment and require that it is worn by employees and volunteers.
- Ensure that the surfaces of floors and traffic routes are suitable for the purposes for which they are used.
- Provide sufficient information for managers to recognise those situations giving rise to risk of slips and trips.

Directors and Delegated Senior Managers will:

- Ensure that managers and supervisors take reasonable steps to check the appropriateness of footwear of employees, control behaviour and activities in the areas for which they are responsible to ensure that slip and trip situations are avoided as far as possible.
- Ensure managers will be receptive to and act upon information regarding slip and trip hazards received from employees, visitors, service users and other members of the public.
- Monitor the frequency and nature of slips and trips incidents and near misses reported.

Premises Managers or those in control of premises will:

- Undertake a workplace risk assessment, which examines the potential for slips and trips in the different conditions likely to be encountered.

- Ensure walking surfaces are kept free from conditions, obstructions or holes, which may cause a person to trip or slip.
- Initiate a programme of planned preventative maintenance, allied to regular checks, to ensure that features provided to protect individuals from slips and trips do not wear out, e.g., slip-resistant floor coverings, floor markings and handrails.
- Cleaning regimes for access routes must be designed to minimise any need for people to walk on wet or contaminated floors, which offer a significantly enhanced risk, through time management or separation and signage.
- Ensure investigations into accidents and near misses are undertaken by the person with local responsibility.
- Monitor and review accident information to identify factors of commonality. For example, multiple accidents in a similar or the same location will suggest there is an underlying root cause that has not been identified.
- Follow the HSE '[causes and prevention](#)' guidance and associated resources when undertaking risk assessments and reviewing accident information.

Strategic Asset Management will:

- Ensure that in the case of new buildings and when modifying existing buildings, they are designed to minimise slipping and tripping risks as effectively as possible.
- Appoint competent designers to assist them in ensuring slipping, tripping and fall hazards are reduced as far as reasonably practicable.

Managers will:

- Remind employees to informally monitor work areas as they move through them, to report any hazard to an appropriate person and to take appropriate remedial action to protect themselves and others from injury.
- Identify through risk assessment procedures those situations where special footwear (including footwear with a high level of slip resistance and ankle support) is required as a control measure and providing this to employees as personal protective equipment.
- Provide employees with clear guidance on the standards of footwear they are expected to wear at work.

- Ensure that all incidents that occur are recorded and suitably investigated on the B-Safe incident reporting system.
- Provide relevant information at induction and other occasions on basic awareness to help them avoid creating or suffering from situations which may lead to slip and trip incidents.

Employees will:

- Come to work suitably attired, which includes footwear. Supervisors have the authority to turn away employees who come to work in inappropriate or unsafe footwear for the work environment or activities.
- Select suitable footwear for your workplace. High, fine heels, open toe shoes and shoes which give little support are unlikely to be appropriate. Note also that higher standards of footwear are required in food preparation areas.
- Take sensible precautions such as using the barrier mats provided to avoid bringing water, dirt, or mud into premises.
- Co-operate with systems put in place to ensure their own safety as well as that of others whilst at work.

The Corporate Health and Safety Unit will:

- Offer advice to managers regarding this policy.
- Maintain and communicate this policy.
- Review this policy at intervals not exceeding 3 years.
- Provide technical advice when required.
- Provide historical information on accidents to facilitate the identification of root causes.

Other Information and links.

- HS 004 Risk Assessment Policy (To be linked prior to publishing)
- HS 026 Manual Handling Policy (To be linked prior to publishing)
- HS 018 Investigating H&S Incidents (To be linked prior to publishing)
- [HSE Preventing slips and trips at work](#)
- [HSE Slips Assessment Tool](#)
- [Slips and trips: Hazard spotting checklist \(hse.gov.uk\)](#)

Governance Arrangements

Policy Compliance

If any employee is found to have breached this policy, they may be subject to Somerset Council's [disciplinary procedure](#).

Policy Governance

The following table identifies who within Somerset Council is Accountable, Responsible, Informed or Consulted with regards to this policy. The following definitions apply:

- **Responsible** – the person(s) responsible for developing and publishing the policy.
- **Accountable** – the person who has ultimate accountability and authority for the policy.
- **Consulted** – the person(s) or groups to be consulted prior to final policy implementation.
- **Informed** – the person(s) or groups to be informed after policy implementation.

Responsible	Corporate Health & Safety Unit
Accountable	Chief Executive
Consulted	LGR JNF Union Group, Health, Safety and Wellbeing Steering Group (HSWSG) and HR Committee
Informed	All members, employees, and volunteers

Review and Revision

This policy will be reviewed as it is deemed appropriate, for instance when there is a change in statutory requirements and/or HSE guidance is revised, but no less frequently than every 36 months. Policy review will be undertaken by rolling programme established by the CHSU and agreed by the Health, Safety, and Wellbeing Steering Group.

Version History

Revision Date	Author	Version	Description of Revision
June 2017	Graham Holmes	V1.0	Final Revision
October 2020	Daniel Thomas	V2.0	Full Review
	Jo Coles	V3.0	Scheduled Review

Document Notification

Approval	Name	Date
Corporate H&S Advisor		

Executive Director Strategy, Workforce, and Localities		
HR Committee		

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**Somerset
Council**

HS05

Food Safety Policy.

Organisation	Somerset Council
Title	Food Safety Policy
Author	Pam Price
Owner	The Corporate Health & Safety Unit
Protective Marking	Official – Unclassified
Primary Legislation	Food Safety Act 1990

Policy on a page

Somerset Council’s activities are diverse; however, a common element in several of its main functions involves the provision of food. Examples of Council food providers are school meal provision, outdoor centres, library cafes and supporting the [Local Pantry Network](#).

The aim of this document is to confirm Somerset Council’s commitment to maintaining the highest standard of food safety and to give guidance and instruction to all relevant personnel on the Council’s requirements to satisfy both the applicable legislation and good industry practice.

In some cases, food facilities are operated by Council Services within Somerset Council which directly employ food handlers. In these cases, the Council is the operator of a food business within the meaning of Article 3 (3) Regulation 178/2002.

Where the provision of food is contracted or franchised to persons or businesses which are not employed by or part of the Council, the Council may not be deemed to be the operator of the food business within the meaning of the Regulations. In exercising all due diligence, it is essential that all such concerns pertaining to providing food on behalf of the Council are required, through contractual or other means, to maintain standards comparable to those required of the Council itself.

Food Safety Policy Statement

It is the policy of Somerset Council (the Council) to protect the health and welfare of all individuals who consume food produced, processed, prepared or otherwise handled by any food facility operated by the Council or contracted by or on behalf of the Council.

The Council will develop, standardise, implement and review effective controls and procedures to ensure that all of the afore-mentioned food facilities comply fully with the Food Safety Act 1990, all Regulations made thereunder and all EU and other relevant legislation in force in the UK which relate to manufacture, storage and distribution of food.

Responsibility

The Council is responsible for ensuring that the food it provides is safe. The implementation of the Food Safety Policy is a line management responsibility. [Heart of the Southwest Trading Standards Service](#) will provide professional advice, assistance and expertise to each service area or operating entity in the implementation of the Policy and the development and establishment of necessary controls, in co-ordination with the appropriate line management.

Implementation of the Policy

For the purposes of the Food Safety Act 1990 and its relevant statutory provisions, Somerset Council is deemed to be the proprietor of a food business and is accountable as such in law. The Chief Executive represents the Council and would be the focus of any formal enforcement action taken against the Council by a food authority.

The Corporate Health and Safety Unit will:

- Offer advice regarding this policy and associated guidance.
- Maintain and communicate this policy.
- Review this policy at intervals not exceeding 3 years.
- Audit compliance with this policy.

Contents

1. Hazard analysis and critical control point (HACCP)	2. Traceability and withdrawal of unsafe food
3. Food hygiene training	4. Temperature control of food
5. Maintenance of premises and equipment	6. Enforcement of food safety law
7. Registration of food premises	8. Food labelling
9. Pre-packed for direct sale	10. Glossary of terms
11. More information	

1. Hazard Analysis and Critical Control Point (HACCP)

Somerset Council food facilities shall have documented systems in place to control food safety problems. Safer Food, Better Business will be used to document these systems based on the principles of HACCP where the Council is the operator of the food business.

1.1 Legal requirement

Article 5 of Regulation 852/2004 requires that:

1. Food business operators shall put in place, implement, and maintain a permanent procedure or procedures based on the following HACCP Principles:

- a) Identifying any hazards that must be prevented, eliminated or reduced to acceptable levels,
- b) identifying the critical control points at the step or steps at which control is essential to prevent or eliminate a hazard or reduce it to acceptable levels,
- c) establishing critical limits at critical control points which separate acceptability from unacceptability for the prevention, elimination or reduction of identified hazards,
- d) establishing and implementing effective monitoring procedures at critical control points,

e) establishing corrective actions when monitoring indicates that a critical control point is not under control,

f) establishing procedures, which shall be carried out regularly, to verify that the measures outlined in subparagraphs(a) to (e) are working effectively; and

g) establishing documents and records commensurate with the nature and size of the food business to demonstrate the effective application of the measures outlined in subparagraphs (a) to (f).

2. Food operators shall:

a) provide the competent authority with evidence of their compliance with the above in the manner that the competent authority requires, considering of the nature and size of the food business,

b) ensure that any documents describing the procedures developed in accordance with the above are always up to date,

c) retain any other documents and records for an appropriate period.

1.2 Hazard Analysis Critical Control Points (HACCP)

The principles (a) – (g) in 2.1 (1) form the basis of a formal system known as HACCP which may be applied to any catering operation. However, the nature and complexity of any system used will, in practice, depend on the nature and complexity of the food operation. For example, where a selection of higher risk foodstuffs is prepared, hazard analysis may need to address each catering step for each ingredient. A less complex operation may take a more general approach in analysing each step.

Food facilities coming under the purview of Somerset Council vary widely from large scale catering to tea and biscuits provision. Detailed HACCP systems will not be appropriate for all facilities, but all facilities must have a system which should include the following elements:

- Identification and analysis of hazards at each step.
- Identification of controls to minimise or eliminate each hazard.
- Determination of control points which are critical to food safety.
- Establishment of controls.
- Monitoring of controls.
- Recording of checks (as appropriate).
- Periodic review.

1.3 Record keeping

In accordance with Regulation 852/2004 relevant documentation and adequate records are required to be kept in all Somerset Council controlled food facilities for a minimum period of 12 months.

The level of documentation in each case will be determined by the competent person or team (see 2.4) carrying out the hazard analysis.

1.4 Competent persons

In accordance with Regulation 852/2004, Annex II, Chapter XII those responsible for the development and maintenance of the procedures referred to in Article 5(1) of the above Regulation or for the operation of relevant guides must receive adequate training in the application of the HACCP principles.

2. Traceability and withdrawal of unsafe food

2.1 Somerset Council food facilities shall have documented systems and procedures in place to ensure unsafe food can be readily identified and removed from service or sale.

2.2 Legal requirement

Articles 18 and 19 of EC Regulation 178/2002, brought into force by the General Food Hygiene Regulations 2004, require that the traceability of food shall be established at all stages of production, processing and distribution by the food business operator and that, if it believes food is not in compliance with food safety Page 9 requirements, it shall immediately initiate procedures to withdraw the food and inform the competent authorities thereof.

2.3 Record keeping

To comply with the legal requirements of Article 18, the following records must be kept:

- Name, address of supplier, nature of products which were supplied.
- Name, address of customer, nature of products which were delivered. This requirement is not necessary when the customer is the final consumer.
- Date of transaction /delivery.

These records must be kept for a minimum period of 12 months.

All Somerset Council food facilities shall have documented systems and procedures in place to ensure they are able to give the consumer sufficient and accurate information on the specified food allergens.

2.4 Withdrawal of unsafe food

To comply with the legal requirements of Article 19, a documented procedure should be in place and be immediately initiated for the withdrawal of food, should the food not meet or is suspected of not meeting food safety requirements. The Trading Standards Officer from the Heart of the Southwest Trading Standards Service shall be contacted as soon as possible so he/she can take the appropriate action.

3. Food hygiene training

All personnel employed in Somerset Council food facilities shall be properly and adequately trained in food hygiene matters.

3.1 Legal Requirement

Regulation 852/2004, Annex II, Chapter XII requires that:

Food business operators are to ensure:

- a) that food handlers are supervised and instructed and/or trained in food hygiene matters commensurate with their work activity,
- b) that those responsible for the development and maintenance of the procedure referred to in Article 5(1) of this Regulation (see 2.1) or for the operation of relevant guides have received adequate training in the application of the HACCP principles.

‘Food handler’ means any person involved in a food business who handles or prepares food whether open (unwrapped) or packaged. Food includes all drink (water, alcoholic beverages, etc.) and ice.

Training must be commensurate with work activities, and it follows that, for example, staff who handle and prepare high risk food will require more in-depth training than those handling low risk or wrapped food. However, supervisory or managerial staff who may not actually handle any food could be expected to undergo a higher level of training in order to effectively supervise handlers of high-risk food.

3.2 Staff who must be trained.

To demonstrate compliance with the legislation Somerset Council categorises food facility employees who must be supervised and instructed and/or trained as follows:

- A. those not directly involved in the preparation and personal handling of open (unwrapped) food, but who are employed as support staff to the food facility, e.g., handlers of wrapped food, hot food delivery persons, cleaners, dedicated maintenance personnel,
- B. those handling, preparing and serving open (unwrapped) food, e.g., cooks, kitchen assistants, servery staff, etc,
- C. managers or supervisors who are responsible for staff handling any type of food. This category may include managers or supervisors who do not actually handle food themselves.

3.3 Level of training required

A food hygiene training regime must be applied to all food facilities coming under the purview of Somerset Council and must meet or exceed the following requirements:

Stage 1: The essentials of food hygiene applicable to the specific food facility or activity

Before starting work all categories of staff (A, B & C) must receive written or verbal instruction in the essentials of food hygiene and be able to demonstrate clear understanding.

Stage 2: Awareness training

All categories of staff (A, B & C) must undergo hygiene awareness training within four weeks of commencement of duties. This instruction may duplicate training already received but must also provide training specific to particular jobs/tasks, controls or monitoring points, etc. This training will also form a module of formal training.

Stage 3: Formal training

All category B and C staff must, within 3 months of appointment, undergo training to level 2 which equates to a standard, certificated food hygiene course, accredited by one of the following organisations:

- The Chartered Institute of Environmental Health (CIEH).
- The Royal Society for Public Health (RSPH).
- The Royal Environmental Health Institute of Scotland (REHIS).
- Society of Food Hygiene Technology.
- Highfield Awarding Body for Compliance (HABC).

Where training is not accredited by any of the organisations listed above, the person operating the food business must be able to demonstrate that training given is of the appropriate standard and equates to level 2.

Food hygiene training to level 2 is incorporated into other vocational courses and employees who have already undergone such training need not repeat it.

Where appropriate, category C staff (managers and supervisors) may be required to undertake formal training to intermediate (level 3) or advanced level (level 4).

Stage 4: Refresher training

Having undergone formal certificated training, all food handlers must receive, as well as any appropriate, ongoing in-house food hygiene training, refresher/update training at least every five years. Such refresher training should be accredited by one of the afore-mentioned organisations and result in award of a renewed certificate. Where training is not accredited by any of the organisations listed, the person operating the food business must be able to demonstrate to the satisfaction of the Trading Standards Officer from the Heart of the Southwest Trading Standards Service that training given is of the appropriate standard.

4. Temperature control of food

Effective systems and procedures for temperature control shall be instituted in all Somerset Council food facilities to prevent the significant growth of harmful organisms and food borne infections.

4.1 Legal requirement

Requirements for temperature control of food are embodied in the Food Safety and Hygiene (England) Regulations 2013, Regulation 32, Schedule 4.

These regulations address all steps from storage to service and apply to foods which, without temperature control, might support the growth of harmful (pathogenic) bacteria or the formation of poisons (toxins).

Note: All temperature control provisions relate to the temperature of the food and **not** the air temperature of the holding unit.

4.2 Chilled food

The legal requirement for the maximum temperature of chilled food is 8°C.

To maintain this temperature, refrigeration equipment used in all food facilities coming under the purview of Somerset Council must be capable of maintaining an air temperature of 5°C or less.

Cold food on display or for service may be warmer than 8°C, but **only once** for a period not exceeding 4 hours. In all Somerset Council food facilities, food that has been on display at a temperature warmer than 8°C for a period more than 4 hours must be discarded and properly disposed of.

4.3 Hot food

Hot food must be kept at 63°C or hotter when it is:

- In the kitchen awaiting service or dispatch.
- Being transported to a servicing point at any distance.
- On display in a serving area where hot holding display facilities are available.

Where there is no equipment for temperature-controlled display at the place of service, hot food may be held for **one period** at a temperature cooler than 63°C, provided that the period does not exceed 2 hours from the time that the food is packed into insulated containers (in the case of transported food), or from the time that food is removed from hot holding for service. If food remains uneaten after this time it must be discarded and properly disposed of.

4.4 Containers for transporting

Food Regulation 852/2004, Annex II, Chapter IV specifies requirements for conveyances and/or containers used for transporting foodstuffs.

Regulation 852/2004, Annex II, Chapter IV specifies requirements for conveyances and/or containers used for transporting foodstuffs namely:

- a) Conveyances and/or containers used for transporting food stuffs are to be kept clean and maintained in good repair and condition to protect foodstuffs from contamination and are, where necessary, designed and constructed to permit adequate cleaning and/or disinfection.
- b) Receptacles in vehicles and/or containers are not to be used for transporting anything other than foodstuffs where this may result in contamination.
- c) Where conveyances and/or containers are used for transporting anything in addition to foodstuffs or for transporting different foodstuffs at the same time, there is, where necessary, to be effective separation of products.
- d) Where conveyances and/or containers have been used for transporting anything else other than foodstuffs or for transporting different foodstuffs, there is to be effective cleaning between loads to avoid risk of contamination.
- e) Foodstuffs in conveyances and/or containers are to be so placed and protected as to minimise the risk of contamination.
- f) Where necessary, conveyances and/or containers are used for transporting foodstuffs are to be capable of maintaining foodstuffs at appropriate temperatures and allow those temperatures to be monitored.

In any situation where food is required to be transported from/to a Somerset Council food facility, the specification of conveyances, containers and procedures must satisfy the above requirements and be capable of achieving the temperature requirements of this policy.

5. Maintenance of premises and equipment

The structure of Somerset Council food facilities and the equipment used therein shall be of appropriate, sound construction and shall be properly and efficiently maintained.

5.1 Legal requirement

Article 4(2) Regulation 852/2004, Annex II, Chapter I specifies general requirements for food premises and Chapters II and III contain specific requirements relating to maintenance of premises, surfaces, articles, fittings and equipment (see Food Safety Guidance section 4 maintenance of premises and equipment) [\(Link prior to publishing\)](#). Terminology varies but has the overall purpose of facilitating easy cleaning and avoiding or minimising risk of contamination.

5.2 Responsibility for maintenance

Responsibility for maintenance of the structure of food facilities and the equipment used therein varies throughout Somerset Council food facilities and may depend on the ownership of the premises, leasing and/or contractual arrangements, etc. For example, a contractor operating a Somerset Council food facility would not normally be responsible for repair or maintenance of the structure but might be contractually responsible for repair or maintenance of equipment. In any circumstances the allocation of responsibility must be clear, and the proprietor of the food business must be able to demonstrate the ability to comply with the requirements whether he/she is directly responsible or not.

5.3 Maintenance procedure

Article 4(2) Regulation 852/2004, Annex II, Chapter I, general requirements for food premises:

1. Food premises are to be kept clean and maintained in good repair and condition.
2. The layout, design, construction, siting, and size of food premises are to:
 - a) permit adequate maintenance, cleaning and/or disinfection, avoid or minimise air-borne contamination, and provide adequate working space to allow for hygienic performance of all operations,
 - b) be such as to protect against the accumulation of dirt, contact with toxic materials, the shedding of particles into food and the formation of condensation or undesirable mould on surfaces,
 - c) permit good food hygiene practices, including protection against contamination and, in particular, pest control,
 - d) where necessary, provide suitable temperature-controlled handling and storage conditions of sufficient capacity for maintaining foodstuffs at appropriate temperatures and designed to allow those temperatures to be monitored and, where necessary, recorded.

3. An adequate number of flush lavatories are to be available and connected to an effective drainage system. Lavatories are not to open directly into rooms in which food is handled.
4. An adequate number of washbasins is to be available, suitably located for cleaning hands. Washbasins for cleaning hands are to be provided with hot and cold running water, materials for cleaning hands and for hygienic drying. Where necessary, the facilities for washing food are to be separate from the hand-washing facility.
5. There is to be suitable and sufficient means of natural or artificial ventilation. Mechanical airflow from a contaminated area to a clean area is to be avoided. Ventilation systems are to be so constructed as to enable filters and other parts requiring cleaning or replacement to be readily accessible.
6. Sanitary conveniences are to have adequate natural or mechanical ventilation.

Directorates must ensure that, for all Somerset Council food facilities, a documented procedure is in place by which defects can be reported to the responsible party. The procedure must ensure that urgent matters are prioritised and that appropriate time limits are imposed for compliance. Records of maintenance requests and stages of progress to completion must be kept by the proprietor of the food business, the party responsible for maintenance, or both where appropriate, to demonstrate the effectiveness of the procedure.

6. Enforcement of food safety law

Personnel employed in Somerset Council food facilities shall co-operate fully with the authorised officers of enforcing food authorities.

6.1 Legal provisions

Administration and enforcement of food safety legislation is embodied in the Food Safety Act 1990. Sections 5 and 6 of the Act deal with “food authorities”, “authorised officers” and “enforcement authorities” as amended by the Food Safety and Hygiene (England) Regulations 2013, Regulations 4 and 5. The powers of entry of premises by authorised officers are found in section 32, as amended by the Food Safety and Hygiene (England) Regulations 2013, Regulation 16.

For Somerset Council food facilities, the enforcing authority for the enforcement of the Food Safety Act 1990 and its relevant statutory provisions will be Somerset Council’s environmental health team.

The authorised Council Officer will usually be a Trading Standards Officer from the Heart of the Southwest Trading Standards Service who has the power to enter Somerset Council food facilities at “all reasonable hours”. This would normally be taken to mean any time that the premises is manned and access to the food facility is possible.

The officer should always be requested to produce a duly authenticated document showing their authority before entering the premises.

6.2 Routine inspections

Inspections by the Trading Standards Officer from the Heart of the Southwest Trading Standards Service will normally be routine. The principal purpose of a routine inspection is to determine compliance with food safety legislation; however, the officer will also carry out a risk assessment which will determine the frequency of future routine inspections.

The officer will also have regard to the Food Standards Agency's E. Coli 0157 Control of Cross-contamination Guidance for food business operators and enforcement authorities which provides guidance on compliance with applicable food hygiene legislation contained in Regulation (EC) No 852/2004.

The food facility will be rated by the officer under the Food Standards Agency's National Food Hygiene Rating System which aims to provide consumers with at-a-glance information about hygiene standards in food businesses.

On completion of the inspection, the officer will prepare an inspection report and, if appropriate, a schedule detailing works necessary to comply with legislation and the time allowed to comply. The officer may also incorporate recommendations into the report but should always confirm that they are not legal requirements. If the report is prepared at the food facility, it may be handed to the person the officer considers to be managing the facility. If the report is prepared elsewhere after the inspection, it will be sent by post to the person that the officer considers is the food business operator, within the meaning of Article 3(6) Regulation 178/2002.

6.3 Forwarding of reports

When a Trading Standards Officer from the Heart of the Southwest Trading Standards Service or a Food Safety Officer from Somerset Council's Environmental Health team presents a report that includes requirements or recommendations in respect of any Somerset Council food facility, a copy of the report must be forwarded to the Senior Catering Advisor without delay.

6.4 Non-routine visits

Non-routine visits by the Trading Standards Officer from the Heart of the Southwest Trading Standards Service or a Food Safety Officer from Somerset Council's Environmental Health team may arise as a result of an incident, such as food poisoning, or perhaps following a complaint. The Senior Catering Advisor must be advised of all non-routine visits as soon as possible by telephone or email.

6.5 Food incident notification

If staff at a food facility become aware of a possible food poisoning outbreak or complaint, the Senior Catering Advisor must be contacted as soon as possible by telephone or email so that they can advise the correct course of action.

6.6 Food facilities operated by others

Where Somerset Council is not the proprietor of the food business, e.g., a contractor or franchisee operates the food facility:

- 1) the requirements of 6.2 and 6.3 must be incorporated into the relevant contract or agreement, and;

2) the contract or agreement must include the requirement for a formal waiver to be given by the proprietor of the food business to permit the disclosure of food safety enforcement information, specific to the subject food facility, to Somerset Council.

7. Registration of food premises

Somerset Council food facilities shall be registered as food premises with the relevant food authority.

7.1 Legal requirement

Article 6(2) Regulation 852/2004 requires that all food premises register with the food authority (Somerset Council) in whose area the premises is situated. The obligation to register and notify changes falls on the operator of the food business; however, if the premises is used by more than one business the responsibility rests with the owner of the premises.

7.2 The purpose of registration

Registration is required to:

- Provide information to food authorities so that they can target their enforcement resources more effectively.
- Identify premises in the case of a hazard warning.
- Identify hygiene training needs.
- Contact food businesses with information on food law.

It is an offence for food premises not to be registered.

Although there are some exemptions for certain low risk premises and activities, it is currently assumed that all Somerset Council food facilities are registerable as food premises.

7.3 Notification of changes

Where significant changes occur in a food facility, for example a change of contractor, the Council's Environmental Health Team must be informed so that registration details can be amended. The responsible Directorate must ensure that the proprietor of the food business notifies the Council's Environmental Health Team of the changes in registration details.

8. Food labelling

All Somerset Council food facilities shall have established procedures in place to be able to inform customers about foods that contain allergens and genetically modified ingredients or derivatives thereof.

8.1 Under Article 9(1)(c) of the food information to consumers (FIC), all Food Business Operators (FBOs) must declare the presence, whether for use as an ingredient or a processing aid, of any of the 14 major allergens listed in Annex II to the Regulation see Guidance, in all cases it should be noted that in accordance with Articles 12 and 13 of the FIC the mandatory information must be:

- Easily accessible

- In a conspicuous place
- Easily visible
- Clearly legible

Information must be indelible (where appropriate for example on food labels where it needs to withstand handling). The information must:

- Not be hidden
- Obscured
- Detracted from or interrupted by other written or pictorial matter or any other intervening material
- All information provided about allergens must be accurate, however it is provided.

8.2 Genetically modified foods

8.2.1 Legal Requirement

Labelling requirements for specific foodstuffs that have been genetically modified or contain genetically modified ingredients are embodied in:

Regulation 1829/2003 through Articles 12 and 13.

These are enacted into UK legislation by the Genetically Modified Food (England) Regulations 2004. These relate to the labelling of products for retail and catering sale.

In general terms, all foods containing ingredients derived from genetically modified foods will now have to be labelled irrespective of whether GM material remains in the ingredient.

8.2.2 Labelling

All foods served must be individually labelled with information about GM ingredients or derivatives.

Current rules require that all foods which are genetically modified, or contain genetically modified ingredients, should be labelled with information about this fact.

Foods that are bought in pre-packed and supplied in that state should already be labelled in compliance with the new rules.

For food supplied non-pre-packed or pre-packed for direct sale, each food item must be labelled with information about the presence of GM ingredients. In the case of food that is packed and sold on the same premises ('pre-packed for direct sale'), each pack should be individually labelled. Where food is sold loose, a label accompanying the food should indicate the presence of GM ingredients.

Where the food is not on display – for example, where food is ordered from a menu – the indication should be given by each item on the menu.

Wording of the information

This is defined in Article 13 of Regulation 1829/2003.

In summary though, the wording should be 'genetically modified' or 'produced from genetically modified (name of the ingredient)' or 'contains genetically modified (name of the ingredient)'.

Where ingredients are listed the words should accompany the appropriate ingredient; otherwise, the statement should be clear on the labelling.

Other labelling

It is also a requirement to give further information about the genetically modified ingredient if, as a result of the modification, it is different from its conventional counterpart in respect of:

- i) Composition,
- ii) nutritional value or nutritional effects,
- iii) intended use of the food,
- iv) the implications for health of certain sections of the population,

or if it may give rise to ethical or religious concerns.

Although these are unlikely possibilities, care should be exercised if using GM ingredients (or foods containing them) to ensure that all information supplied with the food is reflected in the final labelling.

8.2.3 Determining compliance

Departments must ensure that operators of food facilities take all reasonable steps to identify the GM content of foods supplied to them.

9. Pre-Packed for Direct Sale (PPDS) [Natasha's law]

The legislative framework around the provision of food allergen information is largely contained in the Regulation (EU) No. 1169/2011 on the provision of food information to consumers (FIC). The FIC imposes a duty on food businesses to ensure that all mandatory food allergen information (relating to 14 substances listed in the FIC that are known to cause allergies) is accurate, available, and easily accessible to the consumer.

Under the FIC, food which is prepacked, for example a sandwich on sale in a school chilled cabinet, must be labelled with full ingredients and any of the 14 specified food allergens present must be emphasised in an ingredients list. For non-prepacked food the allergen labelling requirements differ. Any food that does not fall within the FIC definition of prepacked food is non-prepacked food.

9.1 Non-prepacked food

Any food presented to the final consumer or mass caterer that does not fall within the definition of 'prepacked food' for any reason including food not within any packaging, or food packaged at the consumers request and PPDS food.

- In a physical retail environment this is likely to apply to foods which are sold loose from a delicatessen counter (e.g., cold meats, cheeses, quiches, pies and dips), fresh pizza, salad bars, bread or pastries sold without wrapping in bakery shops or via bakery counters, meat from butchers, etc.
- In a catering environment this is likely to apply to foods which are not sold prepacked, for example food from a takeaway, or meals served in a canteen or a restaurant.

9.2 Prepacked food

This is defined in Regulation (EU) No. 1169/2011 (Article 2(2)(e)) as 'any single item for presentation as such to the final consumer and to mass caterers, consisting of a food and the packaging into which it was put before being offered for sale, whether such packaging encloses the food completely or only partially, but in any event in such a way that the contents cannot be altered without opening or changing the packaging; 'prepacked food' does not cover foods packed on the sales premises at the consumer's request or prepacked for direct sale. Food is considered prepacked when it is put into packaging prior to before being offered for sale and:

- is either fully or partly enclosed by the packaging; and
- cannot be altered without opening or changing the packaging; and
- is ready for sale to the final consumer or to a mass caterer.

9.3 Prepacked for direct sale (PPDS) food

Food that is packed before being offered for sale by the same food business to the final consumer:

- i) on the same premises; or
- ii) on the same site, or in this instance 'site' refers to a building complex such as a shopping centre or airport terminal in which the same food business operates from more than one unit within the building complex. FSA Food Allergen Labelling and Information Requirements: Technical Guidance – June 2020
- iii) on other premises if the food is offered for sale from a moveable and/or temporary premises (such as marquees, market stalls, mobile sales vehicles) if the food is offered for sale by the same food business who packed it.

PPDS food does not include food packed at a consumer's request, food not in packaging or food in packaging that can be altered without opening or changing the packaging.

10. Glossary of terms used

Allergen: A substance, usually a protein, capable of inducing an allergic reaction.

Authorised Officer: Any person authorised in writing by a food authority to act in matters arising under the Food Safety Act 1990 as amended Food Safety and Hygiene (England) Regulations 2013 Regulation 12.

Coeliac Disease: This is an autoimmune disease caused by an adverse reaction to eating gluten, a protein in cereals namely wheat, rye, oats, spelt, kamut or their hybridised strains. Adherence to the gluten free diet is the complete medical treatment and having coeliac disease therefore requires significant dietary modification.

Critical Control Point: A step in a food operation where hazards must be controlled to ensure that a hazard is eliminated or reduced to a safe level.

Due Diligence: The legal defence, available in Section 21 of the Food Safety Act as amended by the Food Safety and Hygiene (England) Regulations 2013, Regulation 12, that a person took all reasonable precautions and exercised all due diligence to avoid the commission of the offence by himself or by a person under his/her control.

Enforcing Authority: For the purposes of this document, Somerset Council.

Essentials of Food Hygiene: Fundamental instruction in food hygiene given before a food handler is allowed to start work for the first time.

Final Consumer: This is defined in Article 3 (18) of Regulation (EC) No.178/2002 as ‘the ultimate consumer of a foodstuff who will not use the food as part of any business operation or activity’. The final consumer will generally be the individual who will be eating or drinking the food or drink provided by the food business.

Food Allergen: This is the substance in a food that can cause an allergic reaction. Allergens are normally proteins, and, in some people, the immune system thinks allergens are foreign or dangerous. The immune response to these allergenic proteins is what leads to allergic reactions. Legislation focuses on 14 specific foods of public health importance (most potent and prevalent food allergens in Europe) which are listed in Annex II by the FIC.

Food Allergy: An adverse reaction to a food that involves the immune system and can be a potentially life-threatening condition. Symptoms can appear within minutes, or up to several hours after a person has eaten food they are allergic to. There is no cure for food allergy. An allergic individual must avoid the food which makes them ill.

Food Authority: For the purposes of this document, Somerset Council.

Food business operator (FBO): This is defined in Regulation (EC) No. 178/2002 (Article 3(3)) (General Food Law) as ‘the natural or legal persons responsible for ensuring that the requirements of food law are met within the food business under their control’.

Food Business: This is defined in Regulation (EC) 178/2002 (Article 3(2)) (General Food Law) as ‘any undertaking, whether for profit or not and whether public or private, carrying out any of the activities related to any stage of production, processing and distribution of food’.

Food Handler: Any person involved in a food business who handles or prepares food whether open (unwrapped) or packaged. [Food includes drink and ice.]

Food Intolerance: Most food intolerances do not involve the immune system and are generally not life-threatening. However, they can make someone feel very ill or affect their long-term health. Examples of food intolerance include lactose and gluten intolerance.

Food Standard Agency: The FSA is an independent government department responsible for food safety and hygiene across the UK. It works with businesses to help them produce safe food, and with local authorities to enforce food safety regulations.

Food Premises: Any premises used for the purposes of a food business.

HACCP Hazard Analysis, Critical Control Point: A management tool that gives a structured approach to identification and control of hazards.

Hygiene Awareness Training: Training to be given to food handlers within 4 weeks of commencement of duties which reinforces earlier training, gives instruction specific to the food facility and forms a module of formal training.

Hazard: A biological, chemical, or physical agent in, or condition of, food with the potential to cause an adverse health effect (Regulation 178/2002).

Hazard Analysis: Identifying hazards, the steps at which they could occur, and the introduction of measures to control them.

Mass Caterer: This is defined in Article 2(2)(d) of FIC as ‘any establishment (including a vehicle or a fixed or mobile stall), such as restaurants, canteens, schools, hospitals and FSA Food Allergen Labelling and Information Requirements: Technical Guidance – June 2020 catering enterprises in which, in the course of a business, food is prepared to be ready for consumption by the final consumer’.

Pre-Packed for Disposable Direct Sales (PPDS) [Natasha’s law]: The legislative framework around the provision of food allergen information is largely contained in the Regulation (EU) No. 1169/2011 on the provision of food information to consumers (FIC). The FIC imposes a duty on food businesses to ensure that all mandatory food allergen information (relating to 14 substances listed in the FIC that are known to cause allergies) is accurate, available, and easily accessible to the consumer.

Regulation (EC) No 178/2002 (Retained EU Legislation) (as amended from time to time): (EC) No.178/2002 of the European Parliament and of the Council laying down the general principles and requirements of food law, establishing the European Food Safety Authority and laying down procedures in matters of food safety.

Regulation (EC) No 1829/2003 (Retained EU Legislation) (as amended from time to time): (EC) No.178/2002 of the European Parliament and of the Council on genetically modified feedstuffs.

Regulation (EC) No 853/2004 (Retained EU Legislation) (as amended from time to time): (EC) No.853/2004 of the European Parliament and of the Council on the hygiene of foodstuffs.

Regulation (EU) No 1169/2011(Retained EU Legislation) (as amended from time to time): Regulation(EU) No 1169/2011 of the European Parliament and of the Council of 25 October 2011 on the provision of food information to consumers, amending Regulations (EC) No 1924/2006 and (EC) No 1925/2006 of the European Parliament and of the Council, and repealing Commission Directive 87/250/EEC, Council Directive 90/496/EEC, Commission Directive 1999/10/EC, Directive 2000/13/EC of the European Parliament and of the Council, Commission Directives 2002/67/EC and 2008/5/EC and Commission Regulation (EC) No 608/2004.

Traceability: The ability to trace and follow food, feed, food producing animal or substance intended to be, or expected to be incorporated into a food or feed, through all stages of production, processing, and distribution (Regulation 178/2002).

11. More information

Free online allergen training:

<http://allergytraining.food.gov.uk/>

For information and advice about food allergies and intolerances, visit the Food Standards Agency website:

www.food.gov.uk/allergy

For information on the EU Food Information for Consumers Regulation 1169/2011 visit:

http://ec.europa.eu/food/food/labellingnutrition/foodlabelling/proposed_legislation_en.htm

For information on gluten, visit the Coeliac UK website:

www.coeliac.org.uk

For the Department of Education school food standards practical guide:

[School food standards: resources for schools - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Allergen advice, training and posters in other languages from Trading Standards: [Food allergen resources](#)

Governance Arrangements

Policy Compliance

If any employee is found to have breached this policy, they may be subject to Somerset Council's [disciplinary procedure](#).

Policy Governance

The following table identifies who within Somerset Council is Accountable, Responsible, Informed or Consulted with regards to this policy. The following definitions apply:

- **Responsible** – the person(s) responsible for developing and publishing the policy
- **Accountable** – the person who has ultimate accountability and authority for the policy
- **Consulted** – the person(s) or groups to be consulted prior to final policy implementation
- **Informed** – the person(s) or groups to be informed after policy implementation

Responsible	Corporate Health & Safety Unit
Accountable	Chief Executive
Consulted	LGR JNF Union Group, Health, Safety and Wellbeing Steering Group (HSWSG) and HR Committee
Informed	All members, employees, and volunteers

Review and Revision

This policy will be reviewed as it is deemed appropriate, for instance when there is a change in statutory requirements and/or HSE guidance is revised, but no less frequently than every 36 months. Policy review will be undertaken by rolling programme established by the Corporate Health & Safety Unit (CHSU) and agreed by the Health, Safety, and Wellbeing Steering Group.

Version History

Revision Date	Author	Version	Description of Revision
April 2020	Brendan O'Connell	V2.0	Full Review
	Pam Price	V3.0	Scheduled Review

Document Notification

Approval	Name	Date
Corporate H&S Advisor	Daniel Thomas	
Executive Director of Strategy Workforce and Localities	Alyn Jones	
HR Committee	Committee	

References and links

The following Somerset Council documents are directly relevant to this policy, and are referenced within this document:

Food Safety Guidance [\(link prior to publishing\)](#)

Issued by: The Corporate Health and Safety Unit

Issued Date: DRAFT TBC



**Somerset
Council**

HSG05

Food Safety Guidance.

Organisation	Somerset Council
Title	Food Safety Guidance
Author	Pam Price
Owner	The Corporate Health and Safety Unit
Protective Marking	Official - Unclassified
Primary Legislation	The Food Safety Act 1990

Purpose of this Guidance

The aim of this document is to confirm Somerset Council's commitment to maintaining the highest standard of food safety and to give guidance and instruction to all relevant personnel on the Council's requirements to satisfy both the applicable legislation and good industry practice.

Guidance Contents

1. Contacts for food safety advice	2. Transporting food in containers
3. Maintenance of premises and equipment	4. E. coli cross-contamination factsheet
5. Food allergens	6. More information

1 Contacts for food safety advice

Emma Blackshaw, Trading Standards Officer, Heart of the Southwest Trading Standards Service Tel: 01392 383000/ 07966 566404 Email: emma.blackshaw@devon.gov.uk

Heart of the Southwest Trading Standards Service Tel: 01392 381381 Email: tradingstandards@devon.gov.uk

Natalie Spicer, Senior Catering Advisor, Contract Support Service (Schools)
Tel: 0777 5406571 Email: natalie.spicer@somerset.gov.uk

Corporate Health and Safety Unit (CHSU) Tel: 01823 355089 Email: chsu@somerset.gov.uk

2 Transporting food in containers

Regulation 852/2004, Annex II, Chapter IV specifies requirements for conveyances and/or containers used for transporting foodstuffs namely:

- a) Conveyances and/or containers used for transporting food stuffs must be kept clean and maintained in good repair and condition to protect foodstuffs from contamination and are, where necessary, designed and constructed to permit adequate cleaning and/or disinfection.
- b) Receptacles in vehicles and/or containers are not to be used for transporting anything other than foodstuffs where this may result in contamination.
- c) Where conveyances and/or containers are used for transporting anything in addition to foodstuffs or for transporting different foodstuffs at the same time, there is, where necessary, to be effective separation of products.
- d) Where conveyances and/or containers have been used for transporting anything else other than foodstuffs or for transporting different foodstuffs, there is to be effective cleaning between loads to avoid risk of contamination.
- e) Foodstuffs in conveyances and/or containers are to be so placed and protected as to minimise the risk of contamination.
- f) Where necessary, conveyances and/or containers are used for transporting foodstuffs are to be capable of maintaining foodstuffs at appropriate temperatures and allow those temperatures to be monitored.

3 Maintenance of premises and equipment

Article 4(2) Regulation 852/2004, Annex II, Chapter I

General requirements for food premises:

1. Food premises are to be kept clean and maintained in good repair and condition.
2. The layout, design, construction, siting, and size of food premises are to:
 - a. permit adequate maintenance, cleaning and/or disinfection, avoid or minimise airborne

contamination, and provide adequate working space to allow for hygienic performance of all operations,

- b. be such as to protect against the accumulation of dirt, contact with toxic materials, the shedding of particles into food and the formation of condensation or undesirable mould on surfaces,
- c. permit good food hygiene practices, including protection against contamination and, in particular, pest control; and,
- d. where necessary, provide suitable temperature-controlled handling and storage conditions of sufficient capacity for maintaining foodstuffs at appropriate temperatures and designed to allow those temperatures to be monitored and, where necessary, recorded.

3. An adequate number of flush lavatories are to be available and connected to an effective drainage system. Lavatories are not to open directly into rooms in which food is handled.

4. An adequate number of washbasins is to be available, suitably located for cleaning hands. Washbasins for cleaning hands are to be provided with hot and cold running water, materials for cleaning hands and for hygienic drying. Where necessary, the facilities for washing food are to be separate from the handwashing facility.

5. There is to be suitable and sufficient means of natural or artificial ventilation. Mechanical airflow from a contaminated area to a clean area is to be avoided. Ventilation systems are to be constructed as to enable filters and other parts requiring cleaning or replacement to be readily accessible.

6. Sanitary conveniences are to have adequate natural or mechanical ventilation.

7. Food premises are to have adequate natural and/or artificial lighting.

8. Drainage facilities are to be adequate for the purpose intended. They are to be designed and constructed to avoid the risk of contamination. Where drainage channels are fully or partially open, they are to be so designed as to ensure that waste does not flow from a contaminated area towards or into a clean area, in particular an area where foods likely to present a high risk to the final consumer are handled.

9. Where necessary, adequate changing facilities for personnel are to be provided.

10. Cleaning agents and disinfectants are not to be stored in areas where food is handled.

Article 4(2) Regulation 852/2004, Annex II, Chapter II

Specific requirements in rooms where foodstuffs are prepared treated or processed (excluding dining areas and movable and/or temporary premises).

1. In rooms where food is prepared, treated, or processed the design and layout are to permit good food hygiene practices, including protection against contamination between and during operations. In particular:

- a) floor surfaces are to be maintained in a sound condition and be easy to clean and, where necessary, to disinfect. This will require the use of impervious non-absorbent; washable and non-toxic materials unless food business operators can satisfy the competent authority that other materials used are appropriate. Where appropriate, floors are to allow adequate surface drainage,

- b) wall surfaces are to be maintained in a sound condition and be easy to clean and, where necessary, to disinfect. This will require the use of impervious, non-absorbent; washable and non-toxic materials and require a smooth surface up to a height appropriate for the operations unless food business operators can satisfy the competent authority that other materials used are appropriate,
- c) ceilings (or where there are no ceilings, the interior surface of the roof) and overhead fixtures are to be constructed and finished so as to prevent the accumulation of dirt and to reduce condensation, the growth of undesirable mould and the shedding of particles,
- d) windows and other openings are to be constructed to prevent the accumulation of dirt. Those which can be opened to the outside environment are, where necessary, to be fitted with insect-proof screens which can be easily removed for cleaning. Where open windows would result in contamination, windows are to remain closed and fixed during production,
- e) doors are to be easy to clean and, where necessary, to disinfect. This will require the use of smooth and non-absorbent surfaces unless food business operators can satisfy the competent authority that other materials used are appropriate; and
- f) surfaces (including surfaces of equipment) in areas where foods are handled and in particular those in contact with food are to be maintained in a sound condition and be easy to clean and, where necessary, to disinfect. This will require the use of smooth, washable corrosion-resistant and non-toxic materials, unless food business operators can satisfy the competent authority that other materials used are appropriate.

2. Adequate facilities are to be provided, where necessary, for the cleaning, disinfecting and storage of working utensils and equipment. These facilities are to be constructed of corrosion-resistant materials, be easy to clean and have an adequate supply of hot and cold water.

3. Adequate provision is to be made, where necessary for washing food. Every sink or other such facility provided for the washing of food is to have an adequate supply of hot and/or cold potable water and be kept clean and, where necessary, disinfected.

Article 4(2) Regulation 852/2004, Annex II, Chapter II

Requirements for movable and/or temporary premises (such as marquees, market stalls, mobile sales vehicles), premises used primarily as a private dwelling house but where foods are regularly prepared for placing on the market and vending machines.

- 1. Premises and vending machines are, as far as is reasonably practicable, to be so sited, designed, constructed, and kept clean and maintained in good repair and condition as to avoid the risk of contamination, in particular by animals and pests.
- 2. In particular, where necessary:
 - a) appropriate facilities are to be available to maintain adequate personal hygiene (including facilities for the hygienic washing and drying of hands, hygienic sanitary arrangements and changing facilities),
 - b) surfaces in contact with food are to be in a sound condition and be easy to clean and, where necessary, to disinfect. This will require the use of smooth, washable, corrosion-resistant and non-toxic materials, unless food business operators can satisfy the competent authority that other materials used are appropriate,
 - c) adequate provision is to be made for the cleaning and, where necessary, disinfecting of working utensils and equipment,
 - d) where foodstuffs are cleaned as part of the food business' operations, adequate provision is to be made for this to be undertaken hygienically,

- e) an adequate supply of hot and/or cold potable water is to be available,
- f) adequate arrangements and/or facilities for the hygienic storage and disposal of hazardous and/or inedible substances and waste (whether liquid or solid) are to be available,
- g) adequate facilities and/or arrangements for maintaining and monitoring suitable food temperature conditions are to be available,
- h) foodstuffs are to be so placed as to avoid the risk of contamination as far as is reasonably practicable.

4 E. coli cross-contamination factsheet

Cross-contamination is one of the most common causes of food poisoning, help to prevent it by following this advice.

Harmful bacteria such as E. coli O157, Campylobacter and Salmonella can easily spread to ready-to-eat (RTE) foods, such as salads and cooked foods, through direct contact with raw foods or indirectly by staff, equipment, contaminated surfaces, or cleaning materials.

Contaminated food can make your customers seriously ill and can even kill. This factsheet, if followed correctly, will help you control the risk of cross-contamination within your business.

Avoid **CROSS-CONTAMINATION** by making sure that there is:

1. adequate **SEPARATION** between raw and RTE foods
2. effective **CLEANING AND DISINFECTION** practices
3. good **PERSONAL HYGIENE**, particularly washing hands thoroughly and handling food hygienically; and
4. effective and appropriate **MANAGEMENT CONTROLS AND STAFF TRAINING** in place.

1. SEPARATION

Your food premises must be designed in such a way to permit good food hygiene practices. If possible, you should have separate staff, equipment, utensils and areas for preparing and storing raw and RTE foods. If this is not possible you must consider and put in place the following measures:

- Work areas can be used for both raw and RTE foods, but only if separated by time. Surfaces must be thoroughly cleaned and disinfected before being used for RTE foods. As an additional safety measure, you should not use work surfaces directly to prepare food and instead use a suitable barrier, for example a chopping board or a container, as the food contact surface.
- Staff can handle and prepare both raw and RTE foods, but they must be adequately trained and observe strict hygiene controls, for example they could reduce hand contact by using separate dedicated utensils to touch food. If handling food staff must wash hands between handling raw and RTE foods. It is best practice to use disposable gloves and/or aprons for raw food preparation.
- Storage facilities should be of suitable size so that there is sufficient separation between raw and RTE food to avoid cross-contamination. It is advisable to store raw meat below RTE foods to avoid juices dripping onto RTE food or its packaging. Using sealed containers can also reduce the risk of contamination.

- Utensils including chopping boards, tongs, containers etc. should, where possible, be dedicated for either raw or RTE food and colour coded to help staff identify their use. Where this is not possible, they should be put through a dishwasher between uses. Make sure that dishwashers are properly maintained, loaded correctly, run on a full cycle, and not interrupted once started.
- Sinks: a single sink may be used for washing raw and RTE foods and for washing utensils, but this needs to be managed properly, for example washing RTE foods/utensils before raw food/ utensils. The sink will also need to be effectively cleaned before being used for RTE products. The use of a bowl or colander to wash food is best practice.

Complex equipment:

Vacuum packers, slicers and mincers should not be used for both raw and RTE foods unless you are able to fully dismantle and thoroughly clean all surfaces that could be contaminated. It is unlikely this will be possible during a normal working day, as it will require time being set aside to do this effectively.

For vacuum packers it is unlikely to be practical for a business to regularly change their use as a competent engineer would need to undertake what is a complicated dismantling and reassembling process.

Other types of complex equipment, such as weighing scales, mixers or temperature probes may be used for both raw and RTE foods, if you put in place effective control measures, and take account of:

- The complexity of the machine. For example, some mixers/food processors are more complex and more difficult to clean than simple tabletop varieties,
- The use of the machine. Will it be used for both raw and RTE foods throughout the day, and if so, have you allowed sufficient time between use for cleaning and disinfection; and
- The required control measures, such as how cleaning and disinfection will be undertaken between raw and RTE food. This cleaning and disinfection can be undertaken using the two-stage process described below.

2. CLEANING AND DISINFECTION

Effective cleaning and disinfection are critical in any food business.

The FSA strongly advises the use of either a dishwasher; a sterilising sink; or a steam cleaner to clean and disinfect equipment.

Chemical disinfection may be appropriate where a dishwasher or heat disinfection is not possible. For example, it may be appropriate to chemically clean a temperature probe that cannot be put through a dishwasher or a work surface that cannot be heat disinfected.

To effectively disinfect areas used for both raw and RTE foods, a two-stage cleaning process must be followed:

Stage 1: use a detergent to clean and remove any visible dirt followed by rinsing with clean water.

Stage 2: disinfect using a disinfectant at the correct dilution and contact time recommended by the chemical manufacturer.

Sanitisers can be used as both a detergent and a disinfectant. When using sanitisers, the two-stage cleaning and disinfection process, as described above, must still be carried out. You should apply the sanitiser first to provide a clean surface and then again to disinfect.

Disinfection will not work on visibly dirty surfaces.

Disinfectants and sanitisers must at least meet the requirements of one of the following standards: BS EN 1276 or BS EN 13697; or other standards that meet the same conditions and requirements.

The FSA recommends that you use disposable single-use cloths when cleaning. If this is not possible, make sure you use separate designated cleaning equipment for raw and RTE areas, for example colour coded cloths.

3. PERSONAL HYGIENE

It is essential that staff follow good personal hygiene practices.

Staff should wash and dry their hands thoroughly using a recognised technique, such as the one in the E. coli guidance or in the manuals listed at the end of this factsheet.

It is important that you and your staff wash hands before handling RTE foods, after going to the toilet, after touching raw meat/unwashed raw vegetables or touching surfaces that have come into contact with raw food.

You need to make sure that you have a separate basin that is dedicated for handwashing and is supplied with hot and cold running water, cleaning materials and a hygienic means of drying hands.

Anti-bacterial hand gels should not be used instead of handwashing. They can be used afterwards as an extra level of protection.

You need to make sure that staff wear clean protective clothing and if this becomes soiled it is changed before handling RTE foods. In a catering environment where staff may be preparing raw and RTE foods consecutively, such as during the cooking process, protective clothing may not need to be changed, but care should be taken to ensure clothing does not pose a risk of cross-contamination for RTE foods. For example, if you undertake and raw food preparation that results in food being splashed then the protective clothing should be changed before handling RTE foods.

4. MANAGEMENT CONTROLS AND TRAINING

Make sure that your food safety management systems are up to date, are effective to control the risk of cross-contamination and are being implemented. Staff must be supervised and instructed and/or adequately trained in the procedures / safe methods that are relevant to their job.

ADDITIONAL INFORMATION

The FSA has produced the following manual to help small caterers with the requirements of setting up a food safety management system which include the messages in this factsheet:

- Safer food better business: [Safer food, better business for caterers Food Standards Agency](#)

CONTACTS

Food Standards Agency Helpline: 0330 3327149

E. coli O157 Cross-contamination Factsheet - Caterers December 2014 Issue 3

5 Food allergens

The following information is taken from the FSA's publication; "**Allergen guidance for food businesses,**" published June 2022. All managers should click on the link for the complete information, follow the guidance, print off the leaflet and put a copy into the facility's food safety file.

[Allergen guidance for food businesses | Food Standards Agency](#)

Introduction

Food business operators in the retail and catering sector are required to provide allergen information and follow labelling rules as set out in [Food law](#).

This means that food business operators must:

- provide allergen information to the consumer for both prepacked and non-prepacked food and drink.
- handle and manage food allergens effectively in food preparation.

Food businesses must make sure that staff receive training on allergens. Staff and managers can complete and share the:

- [free food allergy training](#)
- [allergen checklist for food businesses](#)

14 Allergens

Food businesses need to tell customers if any food they provide contain any of the listed allergens as an ingredient.

Consumers may be allergic or have intolerance to other ingredients, but only the 14 allergens are required to be declared as allergens by food law.

The 14 allergens are: **celery, cereals containing gluten** (such as wheat, barley and oats), **crustaceans** (such as prawns, crabs and lobsters), **eggs, fish, lupin, milk, molluscs** (such as mussels and oysters), **mustard, peanuts, sesame, soybeans, sulphur dioxide and sulphites** (if the sulphur dioxide and sulphites are at a concentration of more than ten parts per million) and **tree nuts** (such as almonds, hazelnuts, walnuts, brazil nuts, cashews, pecans, pistachios and macadamia nuts).

This also applies to additives, processing aids and any other substances which are present in the final product.

Allergen labelling for different types of food

There are a number of ways in which allergen information can be provided to your customers. You will need to choose the method which is best for your business and the type of food you serve.

Prepacked foods refer to any food put into packaging before being placed on sale, while non-prepacked food (loose food) is unpackaged food. Different allergen labelling rules apply depending on how the food is provided.

The [technical guidance](#) provides a detailed explanation of the labelling requirements for each food type.

Prepacked

Prepacked products refer to any food put into packaging before being placed on sale. Food is prepacked when it:

- is either fully or partly enclosed by the packaging
- cannot be altered without opening or changing the packaging
- is ready for sale.

Prepacked food must have an ingredients list present on the packaging. Allergens present in the product must be emphasised each time they appear in the ingredients list.

Prepacked for direct sale

Prepacked for direct sale products are foods that have been packed on the same premises from which they are being sold.

Common foods that can fall into this category include sandwiches, salads and pies made and sold from the premises in which they are made.

[Prepacked for Direct Sale \(PPDS\)](#) foods need to have a label with a full ingredients list with allergenic ingredients emphasised within it.

These changes will provide essential information to help people with a food allergy or intolerance make safe food choices.

Non-prepacked (loose) foods

If you provide non-prepacked foods, you must supply allergen information for every item that contains any of the 14 allergens.

Non-prepacked (loose) foods include:

- foods sold loose in retail outlets.
- foods which are not sold prepacked.

Non-prepacked allergen information requirements can apply to loose items sold at a delicatessen counter, a bakery, a butcher's, as well as meals served in a restaurant, and food from a takeaway.

Free-from, gluten-free and vegan claims

Making free-from claims for foods requires strict controls of ingredients, how they are handled and how they are prepared. A free-from claim is a guarantee that the food is suitable for all with an allergy or intolerance.

For example, if you are handling wheat flour in a kitchen and you cannot remove the risk of cross-contamination through segregation by time and space, you should let the customer know. You should not make any gluten-free or wheat-free claims.

The Food and Drink Federation provides specific information and guidance on [free-from and gluten-free claims](#).

Customers sometimes assume that vegan meals are free-from animal-based allergens (egg, fish, crustaceans, molluscs, milk). This is not always the case as low-level cross-contamination from these ingredients can occur during the production process. You need to be clear about this risk in the food you provide.

The Food and Drink Federation provides specific information and guidance on [allergen-free and vegan claims](#).

Allergen information for different types of food businesses

How you provide allergen information to customers will depend on the type of food business. Food business staff can learn more about providing allergen information by completing the free [food allergy training](#) and by using the [allergen checklist](#).

Food businesses

You must provide allergen information in writing if you sell or provide food to your customers directly. This could be either:

- full allergen information on a menu, chalkboard or in an information pack
- a written notice placed in a clearly visible position explaining how your customers can obtain this information.

When allergen information is provided as part of a conversation with a customer, this can be backed up by written information. This would ensure that it is accurate and consistent.

You can display this [allergy and intolerance sign](#) to tell customers how they can find allergy information, or create your own.

Allergen ingredient recording

You need to make sure that you know what is in the food you provide. You can do this by recording allergen ingredient information in a written format. Allergen ingredients information should be:

- recorded on product specification sheets,
- included on ingredients labels and ingredients should be kept in original or labelled containers,
- included in recipes or explanations of the dishes provided – you need to consider the impact when recipes change,
- up to date.

[Allergen ingredient templates](#) and other training resources may be useful in allergen planning your menu.

Avoiding allergen cross-contamination

It is important for food businesses to take steps to avoid cross-contamination in food preparation to protect customers with a food allergy.

There are a number of actions you can take to prevent cross-contamination with allergens. These include:

- cleaning utensils before each usage, especially if they were used to prepare meals containing allergens,
- washing hands thoroughly between preparing dishes with and without certain allergens
- storing ingredients and prepared foods separately in closed and labelled containers
- keeping ingredients that contain allergens separate from other ingredients,
- allergen cross-contamination can also happen through using the same cooking oil. To cook gluten-free chips, you cannot use the same oil which has been previously used for cooking battered fish.

If you cannot avoid cross-contamination in food preparation, you should inform customers that you can't provide an allergen-free dish.

The Food and Drink Federation provides specific information and guidance on [free-from and gluten-free claims](#).

Dealing with severe allergic reaction

When someone has an allergic reaction to a food it is important that all staff should know what to do. If someone is having an allergic reaction, this is what you should do:

- Do not move the customer, because this could make them worse.
- Call 999 immediately and describe what is happening; explain that you think the customer may be having a serious allergic reaction or anaphylaxis (pronounced anna-fill-axis). It is important to mention the word anaphylaxis to ensure that the urgency of the situation is communicated, and that appropriate medication will be available.
- Ask the customer if they carry an adrenaline pen and, if necessary, help them retrieve it. If a staff member or first aider is trained in administering adrenaline and the customer is struggling to self-administer, then offer to assist them.
- Send someone outside to wait for the ambulance while you stay with your customer until help arrives.

Dealing with allergen information: A quick checklist

1. When someone asks you if a food contains a particular ingredient, always check every time – never guess.
2. If you are selling a food that contains one or more allergenic ingredients, list them on the card, label, chart or menu – and make sure the information is kept up to date and is accurate.
3. Keep up-to-date ingredients information for any ready-made foods that you use (for example, ready-made sandwich filling). The ingredients are usually on the label or invoice.
4. When you are making food, keep a record of all the ingredients (and what they contain), including cooking oils, dressings, toppings, sauces and garnishes.
5. If you change the ingredients of a food, make sure you update your ingredients information and tell your staff about the change.
6. If someone asks you to make food that does not contain a particular ingredient, don't say yes unless you can be absolutely sure that none of that ingredient will be in the food.

7. If you are making food for someone with an allergy, make sure work surfaces and equipment have been thoroughly cleaned. And wash your hands thoroughly before preparing that food. Control the risks.

Enforcement and penalties

Apart from the possibility of making a customer seriously ill, you could also face the risk of financial and reputational damage to your food business if you fail to comply with allergen information requirements. Local authorities enforce allergen information regulations. Failure to comply can result in action from the local authority.

If you fail to act on advice given by the local authority, an improvement notice may be issued. If you do not meet the requirements of this notice, you will be issued with a penalty.

Useful resources

[Allergens chef recipe cards](#)

[Food Standards Agency food allergy online training](#)

[Allergen guidance for food businesses](#)

[Coeliac UK for gluten information](#)

6 More information

Free online allergen training:

<http://allergytraining.food.gov.uk/>

For information and advice about food allergies and intolerances, visit the Food Standards Agency website:

www.food.gov.uk/allergy

For information on the EU Food Information for Consumers Regulation 1169/2011 visit:

http://ec.europa.eu/food/food/labellingnutrition/foodlabelling/proposed_legislation_en.htm

For information on gluten, visit the Coeliac UK website: www.coeliac.org.uk

For the Department of Education school food standards practical guide:

[School food standards: resources for schools - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Allergen advice, training and posters in other languages from Trading Standards: [Food allergen resources](#)

Review and Revision

This Guidance will be reviewed as it is deemed appropriate, but no less frequently than every 36 months. Policy review will be undertaken by rolling programme established by the CHSU and agreed by the Health, Safety, and Wellbeing Steering Group.

Version History

Revision Date	Author	Version	Description of Revision

Document Notification

Approval	Name	Date



HSG19

Legionella Guidance

Organisation	Somerset Council
Title	Legionella Guidance
Author	Pam Price
Owner	The Corporate Health and Safety Unit
Protective Marking	Official - Unclassified
Primary Legislation	Health and Safety at Work etc. Act 1974 and The Control of Substances Hazardous to Health Regulations 2002

Purpose of this Guidance

Approved Code of Practice L8 (ACoP) (4th edition) helps duty holders, including employers, those in control of premises and those with health and safety responsibilities to comply with their legal duties in relation to legionella. Somerset Council (SC) is committed to compliance with the ACoP for Legionnaires' disease and ensuring a safe place of work for its employees. This document aims to provide guidance on how best to protect employees and minimise the risks of Legionnaires' disease.

Contents

1 Quick facts	2 What is legionella and Legionnaires' disease?
3 Legal requirements	4 What are SC's arrangements?
5 What checks are normally required by the Premises Manager?	6 How to perform checks & implement the control measures
7 What information and training is available?	8 How to manage the risk of scalding
9 Alternative sources for heating water	10 What to do in the case of an outbreak
11 Spa baths	12 Frequently asked questions
13 Construction works	14 References and links

Issued by: The Corporate Health and Safety Unit

Issued Date: DRAFT TBC

1 Quick facts:

- [Legionnaires' disease](#) is caused by bacteria that exist naturally in water and can be inhaled in the form of water droplets from outlets such as taps, showers and cooling towers.
- SC has a [legal duty](#) to assess the risks of Legionnaires' disease and to prevent or control the risk.
- SC has a robust legionella risk management [programme](#) in place.
- Premises Managers need to ensure that their [responsibilities](#), specified in the risk assessment, are implemented.
- Premises Managers need to complete the legionella training to understand how to perform the [checks](#) specified in the legionella risk assessment.
- All legionella risks need to be managed without creating a risk of [scalding](#).
- Alternative [heating sources](#) need to be managed in line with the legionella risk assessment and manufacturer's recommendations for the installed system.
- Prompt, appropriate action must be taken in the event of a Legionnaires' disease [outbreak](#)
- Legionella can pose a particular risk in [spa baths](#).

2 What is legionella and Legionnaires' disease?

Legionella bacteria are common in natural (rivers and lakes etc.) and artificial water systems, e.g., hot and cold-water systems (storage tanks, pipework, taps and showers).

We usually associate the presence of legionella bacteria with larger water systems, e.g., in factories, hotels, hospitals, museums, and cooling towers, but they can also live in smaller water supply systems used in homes and other residential accommodation. Other potential sources of legionella include spa and whirlpool baths, humidifiers (in factories) and fire-fighting systems (sprinklers and hose reels).

Legionella bacteria can survive in low temperatures but thrive at temperatures between 20°C and 45°C. High temperatures of 60°C and above will kill them.

Legionnaires' disease is a potentially fatal form of pneumonia that can occur when water droplets, containing legionella bacteria, are inhaled. It can affect anybody, but some people are at higher risk; including those over 45, smokers and heavy drinkers, those suffering from chronic respiratory or kidney disease, and people whose immune system is impaired.

What are the symptoms?

The early symptoms of Legionnaires' disease include a 'flu-like' illness with muscle aches, tiredness, headaches, dry cough, and fever. Sometimes diarrhoea occurs and confusion may develop. Deaths occur in 10-15% of the general population and may be higher in some groups of patients.

The incubation period normally ranges from 2 to 10 days. In rare cases some people may develop symptoms as late as three weeks after exposure.

How can it be prevented?

To ensure that water systems do not harbour dangerous levels of legionella bacteria:

- Water systems and outlets must be maintained in good, physical condition and be kept clean.
- Water temperatures, between 20°C and 45°C, should be avoided. Where possible, water should be stored at the right temperature, i.e., < 20°C or > 60°C.
- Stagnation, and the presence of foreign matter and biological nutrients in the water, must be avoided.
- Water temperatures at the outlets must be regularly tested in accordance with this guidance, anomalies considered and rectified.
- Regular usage is important where stored water exists, so review turnover from time to time and limit storage where possible.

What can make a legionella outbreak more likely?

This section explains some of the factors that legionella risk assessment contractors look for when assessing the legionella risk in water systems:

<i>Risk factor</i>	Is this a problem?
1) Are there areas of poor water flow in the water system? <i>Why? Little or no flow results in stagnation, enabling bacteria to multiply undisturbed.</i>	Are there infrequently used outlets, e.g., showers, outside taps etc.?
	Are storage cisterns unnecessarily large?
	Are there areas where stagnant water occurs (dead legs), e.g., pipes to a washing machine that is no longer used?
	Is any pipework unnecessarily long or indirect?
	Does anything prevent the system being completely drained or pumped out?
	Does anything prevent easy access to water tanks or evaporative condensers for visual inspection and maintenance?
	Is the water temperature between 20°C and 45°C? (the range which allows bacteria to thrive)

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<p>2) Do water storage conditions allow the bacteria to multiply?</p> <p><i>Why? The wrong temperature and the presence of nutrients in the water can mean that bacteria thrive.</i></p>	Are any cold-water tanks situated in warm parts of buildings?
	Are there any tanks where water is not uniformly heated?
	Are there TMVs that could set a favorable outlet temperature for legionella growth?
	Is there debris in the system, such as rust, sludge, or scale (often a problem in old metal cisterns) that could provide food for growing legionella?
	Have algae, organic matter, insects, or vermin been allowed to enter and remain in tanks?
	Could poor housekeeping or maintenance allow foreign matter into tanks?
	Have plumbing materials been used which do not comply with water authority by-laws?
	Have materials been allowed to deteriorate?
<p>3) Do you have any water outlets that might release a spray?</p>	<p>These may include:</p> <ul style="list-style-type: none"> ▪ shower heads. ▪ spas or whirlpool baths. ▪ pools, including hydrotherapy pools. ▪ humidifiers; water fountains. ▪ evaporative condensers; and ▪ taps (although this is rare).
<p>4) Who are the people at risk?</p>	<p>Are any of your employees, residents, visitors etc. vulnerable to infection, for example:</p> <ul style="list-style-type: none"> ▪ Are they over 45? ▪ Are they smokers? ▪ Are they heavy drinkers?

- | | |
|--|---|
| | <ul style="list-style-type: none"> ▪ Do they suffer from respiratory disorders? ▪ Do they already have an impaired immune system? |
|--|---|

3 Legal requirements

The standards for compliance are contained in the Health and Safety Executive's (HSE) Approved Code of Practice (ACoP) document L8: Legionnaires' disease – The Control of Legionella Bacteria in Water Systems.

In summary:

- An assessment of the legionella risks needs to be undertaken for all premises, and should be reviewed via the Civica website, at least annually, or sooner should a significant change occur to the building or activities carried out.
- A written scheme of action needs to be implemented, to reduce these risks to an acceptable limit.
- People undertaking actions, in support of the above, need to be competent.
- A 'Responsible Person' must be appointed for each premises where there is a reasonably foreseeable legionella risk.
- Records need to be kept (for at least 5 years) of all legionella checks, treatment, and training.
- Competent advice must be available.

The HSE, when inspecting legionella risk systems, will compare what they find on site with the standards laid down in ACoP L8. Where standards fall below the requirements set out in the ACoP, inspectors may use enforcement action to ensure compliance.

4 What are SC's arrangements?

How does SC comply with its legal requirements? SC has designed its compliance system around the requirements specified in the L8 ACoP.

This is how it is dealing with each of the 7 main requirements:

1. An assessment of the legionella risks needs to be undertaken for all premises and regularly reviewed

- **SC Non-school premises** - SC has enabled approved contractors to undertake legionella risk assessments, on all non-school premises, it is responsible for
- **SC Schools who have a contractual arrangement in place with the Education Partnership and Skills team** – They offer a choice of contractors to undertake legionella risk assessments, on behalf of all schools, who buy their services and they manages these contractors on behalf of these schools

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- **Local authority-maintained schools (who do NOT have a contractual arrangement in place with the Education Partnership and Skills team)** – The school is solely responsible for appointing their own competent contractor to undertake a legionella risk assessment on their behalf
- A legionella risk assessment will identify the hazards and explain what needs to be done to reduce the risk of a legionella outbreak
- These written assessments, will be supplied to the respective premises, once complete so that they have a copy for their records
- Premises Managers are required to review their legionella risk assessments, at least annually, via the Civica website or sooner should a significant change occur to the building or activities carried out

2. A written scheme of action needs to be implemented, to reduce these risks to an acceptable limit

- The legionella risk assessments constitute written schemes of actions. They specify who needs to do what and when.
- **SC Non-school premises** – An approved contractor will undertake remedial work and the annual monitoring/ maintenance tasks that require technical knowledge of, and access to, the water storage and temperature control elements of the water systems.
- **SC Schools who have a contractual arrangement in place with the Education Partnership and Skills team** – They offer a choice of contractors who will undertake remedial work and the annual monitoring/ maintenance tasks that require technical knowledge of, and access to, the water storage and temperature control elements of the water systems. The team manages these contractors on behalf of these schools.
- **Local authority-maintained schools (who do NOT have a contractual arrangement in place with the Education Partnership and Skills team)** – The school is solely responsible for appointing their own competent contractor to undertake remedial work and the annual monitoring/ maintenance tasks that require technical knowledge of, and access to, the water storage and temperature control elements of the water systems.
- **All schools** – in addition to the above 2 bullet points, all schools also have the option of buying back the services from the Education Partnership and Skills team to assist with legionella monitoring tasks such as temperature checks.
- The Premises Manager will be responsible for ensuring that any local management issues/ [checks](#) are actioned as appropriate.

3. People undertaking actions, in support of above, need to be competent

- [Training](#) is provided by SC either in the form of a [legionella training presentation](#) (Schools) or a module available on [The Learning Centre \(TLC\)](#) (Non-schools).

4. A 'Responsible Person' must be appointed for each premises where there is a reasonably foreseeable legionella risk

- This person should be a manager, or have similar status and sufficient authority, competence, and knowledge of the installation to ensure that the relevant procedures are carried out in a timely and effective manner.

For the purposes of this guidance, the Corporate Responsible Person will be as follows:

- SC Strategic Asset Management Client - for all non-school premises.
- SC Education Partnership and Skills team – for all schools who have a contractual arrangement in place with Education Property.
- Local authority-maintained schools (who do not have a contractual arrangement in place with Education Property – the responsible person is the school.

5. Records need to be kept (for at least 6 years) of all legionella checks, treatment and training

- Managers should hold records of individuals who have successfully completed the legionella presentation along with the quiz.
- Managers should hold records of individuals who have attended any other form of legionella training e.g., completed module on TLC (non-schools) or Blackboard (schools)
- Records should be kept on site for any legionella checks that are being carried out by the Premises Manager (or 3rd party on their behalf).
- Records must be accessible on site for any legionella remedial/ maintenance work that has been carried out to the water systems by any appointed contractor.
- Premises Managers should ensure that all records are stored safely, and that staff know where they are located should they be required by anybody in the execution of their duties e.g., HSE, CHSU, Area Engineers, Building Surveyors, Strategic Asset Management, Support Services for Education etc.
- Records of the legionella risk assessment annual review should be held on the Civica website.

6. Competent advice must be available

- Dave Dangerfield (SC Building Services Advisor – Strategic Asset Management) 01823 356857/ 07768 801683 or email: dave.dangerfield@somerset.gov.uk
- The Education Partnership and Skills team will provide support and advice to schools and other educational establishments who buy their services only. The admin team contact details are: 01823 355358 or email: property@somerset.gov.uk
- The CHSU can also advise and can be contacted on 01823 355089 or email: chsu@somerset.gov.uk. The CHSU will provide advice and support to all non-schools and

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to local authority-maintained schools (who do not have a contractual arrangement in place with the Education Partnership and Skills team).

7. Addressing remedial work identified under LRA inspections

Following the production of a LRA by the appointed competent contractor, identified risks shall be addressed in the following timescales:

- Remedial work identified as **high risk** to be actioned with 20 working days of report being issued to Somerset Council.
- Remedial work identified as **medium risk** to be actioned with 40 working days of report being issued to Somerset Council.
- **Low risk** works are for awareness/ periodic review only.

Exceptional circumstances:

High / medium risk works which involve a large degree of planning and management e.g., replacement of water tanks in roof spaces, are to be flagged as 'work in progress' and to be actively managed in a suitable timescale (with an agreed target date) but to acknowledge the 20-working day target may not be met.

5 What checks are normally required by the Premises Manager?

Below is a typical list of checks that the Premises Manager needs to ensure are undertaken (these may be done by a local member of staff or may be contracted out to a third party).

However, always remember to check your legionella risk assessment for details of the checks required for your premises.

Where the temperatures fall outside the standards, this must be reviewed locally and if improvements cannot be achieved then they need to be reported to the responsible person <link to no. 6 competent people list> immediately.

References for table below:

1. Little used outlets should be flushed on a weekly basis where the level of use is known to be unpredictable, intermittent or after a week without use e.g., after a school holiday.
2. Sentinel taps should be checked monthly (schools – half termly). For hot water systems, sentinel taps are the first and last taps on a re-circulating system. For cold water systems (or non-re-circulating hot water systems), sentinel taps are the nearest and furthest taps from the storage tank. The choice of sentinel taps may also include other taps, which are considered to represent a particular risk.
3. Lower temperatures may be permitted only when certain systems are used and with suitable mitigations in place. Section 9 refers to the exceptions.

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4. The most convenient place to measure the temperature of the incoming cold-water inlet (annually) is usually at the ball valve outlet to the cold-water storage tank.

Frequency	Item	Action	Standard to Meet	
			Cold Water	Hot Water
Weekly	Little used outlets ¹	Flush through and purge		
Monthly/ Half-Termly (schools)	Sentinel taps ²	Water temperature check	Below 20°C after running water for 2 minutes	At least 50°C within 1 minute of running water
	If fitted, input to Thermostatic Mixing Valves (TMVs) on a sentinel basis	Water temperature check		Water supply to the TMV should be at least 50°C within 1 minute of running water
	Water leaving and returning to calorifier			Outgoing water should be at least 60°C ³ , return at least 50°C
Quarterly / half-termly	Shower heads and hoses	Dismantle, descale and clean		
Annually	Incoming cold-water inlet ⁴	Water temperature check	The water should be below 20°C at all times	
Annually	All non-Sentinel taps	Water temperature check	Water temp should be below 20°C after running water for up to 2 minutes.	Water temp should be at least 50°C within a minute of running the water

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6 How to perform checks & implement the control measures

Action		How
Purge little-used outlets <i>to ensure fresh water supplies and to limit the risk of bacteria growth in the pipework system</i>		<p>Hot water: Turn on hot water taps and run to waste the initial cold water, until cold water heats up and hot water starts flowing i.e., “run to hot”.</p> <p>Cold water: Turn on cold water taps and run to waste the initial tepid water, until cold water is flowing.</p> <p>Showers: All types must be thoroughly flushed through at full temperature for 2 minutes. (This should be done by either removing the shower head, where possible, or by wearing a face mask, so as not to breathe in the aerosol created by a shower head).</p>
Measure temperature	Outlets fitted with a TMV (Thermostatic Mixing Valve)	<ol style="list-style-type: none"> 1) Connect a <i>temperature surface probe</i> or a <i>surface contact type thermometer</i> to the pipework immediately before the TMV Demo Video for Thermostatic Mixing Valve 2) Keep the water running until the temperature displayed has stabilised on the thermometer 3) Read the temperature <p>Where inaccessible TMVs / pipework are identified then please contact Strategic Asset Management (non-schools) and Education Property (for schools who have a contractual arrangement in place with the Education Partnership and Skills team) and they will review options around gaining access to pipework and TMVs in order to correctly record temperatures. For Local Authority Maintained schools (who do NOT have a contractual arrangement in place with the Education Partnership and Skills team) it is solely your responsibility to ensure that you put local arrangements in place to allow access to TMVs at all times.</p>
	Outlets not fitted with a TMV	<ol style="list-style-type: none"> 1) Run the water 2) Hold a probe thermometer pointing downwards into the flow of water and record the temperature 3) Keep the thermometer in the water until the measurement has stabilised (30 – 60 seconds), then read the temperature Hot water pipe how to test hot water flow temperatures demo video

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Temperature checks:**Sentinel outlets – How to check hot water temperatures**

The hot water temperature should be at least 50°C within a minute of running the hot water and should be measured and formally recorded monthly (schools – half termly).

Water leaving and returning to a calorifier (water heater), the outgoing water should be at least 60°C*, and the return at least 50°C, and should be measured and formally recorded monthly (schools – half termly).

Checking and regularly monitoring the water temperature at a hot water sentinel outlet to ensure your system achieves a temperature of at least 50°C is an important legionella risk management task. Find out how to do it with this short video.

<https://legionellacontrol.com/articles/139-sentinel-outlets-how-to-check-hot-water-temperatures>

Sentinel outlets – How to check cold water temperatures

The same method as above should also be applied when checking cold water temperatures.

The cold-water temperature of your system should be below 20°C after running the cold water for up to two minutes and should be measured and formally recorded monthly (schools- half termly).

Probes & calibration:

The type of probe to be used is generally called a stem thermometer; however, where thermostatic mixing valves (TMVs) are fitted (and where access to the pipework can be achieved) then a surface temperature/ contact thermometer can be used.

It is recognised that you may not be able to gain access to your pipework as it may be boxed in, therefore most premises tend to choose the stem thermometer by default. However, where [inaccessible TMVs / pipework](#) are identified then please put arrangements in place to gain access.

Legionella stem thermometers can be purchased from various suppliers on the internet. A simple search will produce several suppliers. There is no recommended or approved supplier; however, the CHSU, Strategic Asset Management and the Education Property will provide support and advice, when purchasing a thermometer, upon request.

Examples of stem thermometers can be found at:

<https://legionellacontrol.com/legionella-products/legionella-thermometers>

* Lower temperatures may be permitted only when certain systems are used and with suitable mitigations in place. Section 9 refers to exceptions.

7 What information and training is available?

1. Risk assessment documentation

All non-schools, which SC has control over, and schools that have a contractual arrangement in place with Education Property have the following documentation:

- A legionella risk assessment which explains the specific advice about what needs to be done in the premises.
- Most premises will also have a logbook for recording details of regular checks (e.g., temperature monitoring). If a logbook is not in place, then there should be some other form of storing records e.g., on your own site-specific spread sheet, in a site folder, on shared computer drive etc.

For local authority-maintained schools, who do not have a contractual arrangement in place with Education Property, it is solely your responsibility to ensure that all the above is in place.

2. Training

SC has provided a self-learning training presentation on Blackboard and a module on TLC, which can be accessed via a computer. It gives the user an understanding of:

- The risks from legionella bacteria,
- The importance of the control measures being applied; and
- How the measures (such as temperature monitoring) can be implemented.

Individuals should notify their manager that they have undertaken the self-learning on Blackboard, such that records of the training can be kept. TLC registers that the course has been completed and issues a certificate after completing an assessment.

3. Premises Management training course

SC provides a legionella risk management module on the Premises Management Training course, which is run by the CHSU.

To book onto a Corporate Premises Management Training course, please contact the CHSU admin team on: 01823 355089 or email chsu@somerset.gov.uk

To book onto a Schools Premises Management Training course, please contact:

SCIL on: 0300 1231967 or email SCIL: scil@somerset.gov.uk

If you still feel, after reading this Guidance, the HS19 Legionella Policy and having studied your legionella risk assessment, that you require further advice or clarification with regards to how you can fulfil your duties, you should contact:

- Dave Dangerfield (SC Building Services Advisor – Strategic Asset Management) Contact details are: 01823 356857/ 07768 801683 or email: dave.dangerfield@somerset.gov.uk

- The Education Partnership and Skills team will provide support and advice to schools and other educational establishments who buy their services only. Contact details are: 01823 355358 or email: property@somerset.gov.uk
- The CHSU can also advise and can be contacted on: 01823 355089 or email: chsu@somerset.gov.uk. The CHSU will provide advice and support to all non-schools and to local authority-maintained schools (who do not have a contractual arrangement in place with the Education Partnership and Skills team).

8 How to manage the risk of scalding

Hot water normally needs to circulate at a minimum of 50°C. However, contact with water at this temperature can sometimes cause scalding, either when water comes out of taps or when somebody leans or falls against a radiator.

So, where a risk assessment has identified that scalding is a reasonably foreseeable risk, the HSE advises the fitting of TMVs (Thermostatic Mixing Valves) to the water supply for baths, showers and hand basins.

A TMV is a valve that blends hot water with cold water to ensure constant, safe outlet temperatures, preventing scalding. TMVs normally prevent the water being discharged at more than 45°C.

Please note that 45°C is the failsafe temperature for water coming OUT of an outlet fitted with a TMV, not the temperature coming into it. The temperature coming into the outlet should be 50°C but the water being discharged from the outlet should be considerably lower. Therefore, if the water coming out of the TMV device exceeds 45°C then the TMV device should fail safe.

45°C is too high an output temperature for an outlet connected to a TMV device. The water coming out of a TMV outlet will not reach 45°C because TMVs are designed to keep water below this level as per the temperatures below. The maximum output temperatures for outlets controlled by TMVs as per NHS Health Guidance Notes are:

- 44°C for an unassisted bath fill
- 46°C for an assisted bath fill (**)
- 41°C for shower applications
- 41°C for washbasin applications
- 38°C for bidet applications

** This high fill temperature should only be considered in exceptional circumstances where there are difficulties in achieving an adequate bathing temperature.

The premises manager should also have in place specific policies that prevent the possibility of persons judged to be at risk gaining access to the bath unaccompanied.

For Corporate Premises: these values correlate with the engineer job notes held by the approved contractor.

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Hot water coming out of a non TMV controlled outlet must be at least 50°C within 1 minute of running water.

TMV controlled outlets should be shown on the water schematic diagram which accompanies the premises Legionella Risk Assessment (LRA).

Hot water temperatures at TMV controlled outlets must be measured at the input to the TMV.

The temperature coming into the outlet should be 50°C but the water being discharged from the outlet should be considerably lower. Therefore, if the water coming out of the TMV device exceeds 45°C then the TMV device should fail safe.

Additionally, please ensure that you also take the temperature of the nearest adjacent hot water outlet that has an accessible hot water pipe to confirm a flow temp of at least 50°C within 1 minute of running water at that point as well.

Where the risk of scalding may be high

The fitting of TMVs is particularly prevalent where there is potential for a vulnerable person to be harmed, for example young children, elderly people, people with disabilities or those with sensory loss who may not be able to respond quickly to a high temperature.

It is especially a risk in care-related premises for whole body water contact in baths and showers.

The risk from legionella must be considered by controllers of premises when designing control measures in relation to the risk of scalding.

Are there any other control measures, for scalding, apart from TMVs?

Yes. The approach will depend on the assessed needs, and of the vulnerable people involved.

TMVs are normally essential if vulnerable people have access to hot taps, baths, or showers. However, there is a practical need for some taps (such as in kitchens) to allow water to be discharged at a higher temperature than 45°C.

Other options include:

- Putting up warning signs adjacent to each tap. This may be sufficient for staff and visitors
- Putting up warning signs with Total Communication (TC) symbols, especially where there are service users with learning disabilities.
- Tactile/ Braille warning signs should be considered if there are members of staff, service users, or an anticipation of visitors who suffer from a visual impairment.
- In primary schools – the risk of scalding can be managed by completing a risk assessment on EEC entitled 'Scalding risk at sinks and hand basins' which can be found under 'Primary general' section.

Notes about access to and the installation of TMVs

TMVs need to be placed as close to the water outlet as possible, to minimise the length of pipe, containing water at a temperature liable to allow the bacteria to multiply.

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When TMVs are installed, they need to be made fully accessible i.e., they should not be boxed in. It is important that access is provided to enable the TMVs to be serviced as required. Additionally, access to TMVs is also important for the testing of the water on the Calorifier side of them.

Where inaccessible TMVs / pipework is identified then please contact Strategic Asset Management (non-schools) and Education Property (for schools who have a contractual arrangement in place with the Education Partnership and Skills team) and they will review options around gaining access to pipework and TMVs to correctly record temperatures.

For Local Authority Maintained schools (who do NOT have a contractual arrangement in place with the Education Partnership and Skills team), it is solely your responsibility to ensure that you put local arrangements in place to always allow access to TMVs.

It is recognised that TMVs are not suitable for all premises as they require a certain amount of pressure to work effectively. Where TMVs cannot be fitted, but there is a risk of scalding, the other options mentioned above e.g., signage, scalding risk assessment etc., should be considered.

9 Alternative sources for heating water

Technical guidance HSG 274 (Part 2) recognises that there are alternative means by which water can be heated and reference is made to solar heating. Advanced technology means that alternative water heating systems are now available on the market, and these include e.g., ground source heat pumps, air source heat pumps. These systems may not heat the water to the required temperature of 60°C (minimum outlet water temperature in calorifier systems) necessary to prevent legionella bacteria growth and therefore should be managed, monitored and maintained to ensure that legionella is prevented by means of other control methods, for example, running periodic water cycles, additional electric heating element, trace heating. Use of these types of systems should be reflected in the legionella risk assessment. Any temperature monitoring of these systems should be directly linked to the control methods that are in place, which should be periodically checked at a frequency in line with manufacturer's recommendations.

10 What to do in the case of an outbreak

If an outside agency, such as the HSE or Public Health England, contacted you to investigate the possibility of an outbreak of Legionnaires' disease then the following action needs to be taken:

- Inform senior management, providing all relevant information.
- Contact the CHSU immediately on 01823 355089 – they will provide you with the relevant course of action, as required.

11 Spa baths

There have been several outbreaks of Legionnaires' disease where the cause was traced back to a spa bath.

Why are spa baths a particular risk?

- Spa baths are self-contained bodies of warm water circulating around users at approximately 30-40°C (the ideal temperature at which legionella bacteria thrives).
- Spa baths are not usually drained between users, so the water has to be continually filtered and cleaned.
- People can be exposed while using the spa, but also just being close enough to breathe in the aerosol created e.g., during demonstrations.
- The water is normally stored at the optimum temperature for the legionella bacteria to multiply.
- Particles of dirt, dead skin cells etc. from the people using the bath accumulate, providing food for the bacteria to feed from.
- The piping for the air and water circulation provides a large surface area for the bacteria to grow on.
- The agitated water forms aerosols and spray via which the bacteria can be breathed in.

Persons responsible for managing spa baths need to ensure that:

- A risk assessment is undertaken to identify and assess any potential sources of legionella, and to consider who and how people could be exposed.
- A plan is prepared, to prevent or control any risks identified, which is implemented, managed, and monitored.
- Records are kept of this work.
- Someone is appointed to manage this responsibility.
- Staff are trained, to correctly operate the spa bath, giving them appropriate information about the risks and plans to control them.

The spa bath should be monitored at the following frequencies, and formal records must be kept:

Frequency	Task
Every two hours	Residual disinfectant level and pH – after the initial test
Three times a day	Water treatment (if not continual)
Daily	Water Clarity (before use)
	Automatic dosing systems
	Disinfectant levels in reservoirs

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	Filters
	Strainers
	Backwash and sand filters
Weekly	Drain, clean and disinfect whole system
	Clean strainers
Monthly	Bacteriological test
	Clean input air filter
	Clean pipes
	All automatic systems
Every three months	Filters (thoroughly)
Annually	Written procedures are up to date
	Sand filter effectiveness

The HSE has published a brief guide to managing spa pools:

<http://www.hse.gov.uk/legionnaires/spa-pools.htm>

HSE and Public Health England have published guidance on the Management of Spa Pools – Controlling the Risks of Infection:

<https://www.gov.uk/government/publications/legionnaires-disease-controlling-the-risk-of-infection-from-spa-pools>

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12 Frequently Asked Questions

Q. What is a legionella risk assessment?

A legionella risk assessment is a site-specific document that details the findings of an examination of the entire water system within the premises. The primary purpose is to identify if there are any parts of the system that might support or enable the growth of the Legionella bacteria and therefore present a risk by contaminating the system.

Q. What are the arrangements for educational establishments?

All schools have the opportunity to enter into a contractual arrangement and buy back the services from Education Property. There are several packages available which schools can purchase directly from Education Property. For more information on these packages, schools can contact the Education Partnership and Skills team on: 01823 355358 or email: property@somerset.gov.uk

Schools that do NOT have a contractual arrangement in place with the Education Partnership and Skills team, and managers of self-help projects, are expected to have made their own similar arrangements and are required to address any remedial actions themselves.

All Academies are stand alone and are therefore responsible for procuring their own legionella risk assessments, and addressing any remedial actions themselves, as appropriate.

Q. Who is responsible for initiating the need for review of the legionella risk assessment (LRA)?

L8 Approved Code of Practice (ACoP) states:

The record of the assessment is a living document that must be reviewed to ensure it remains up to date. Arrange to review the assessment regularly and specifically whenever there is reason to suspect it is no longer valid. An indication of when to review the assessment, and what to consider, should be recorded. This may result from the following examples:

- (a) Changes to the water system or its use.
- (b) Changes to the use of the building in which the water system is installed.
- (c) The availability of new information about risks or control measures.
- (d) The results of checks indicating that control measures are no longer effective.
- (e) Changes to key personnel.
- (f) A case of Legionnaires' disease/legionellosis associated with the system.

Using the information provided above, the table below indicates who is responsible for initiating a review of the legionella risk assessment:

	Criteria which would instigate a review:	Premises Manager (PM) to instigate the review	Strategic Asset Management to instigate the review
a	<p>Changes to the water system or it's use.</p> <p>(This will vary depending on whether the changes are done locally or corporately)</p>	<p>If the premises themselves carry out any work locally, which may include changes to the water system or it's use, then the PM is responsible for contacting Strategic Asset Management (non-schools) / Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) to request a review of the LRA.</p> <p><i>**For schools that do NOT have a contractual arrangement in place with the Education Partnership and Skills team, then the school will be solely responsible for arranging for a review of the LRA to be carried out themselves**</i></p>	<p>If Strategic Asset Management /Education Property carry out any work corporately on behalf of the premises, which may include changes to the water system or it's use, then Strategic Asset Management / Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) will be responsible instigating a review of the LRA themselves.</p>
b	<p>Changes to the use of the building in which the water system is installed.</p> <p>(This will vary depending on whether the changes are done locally or corporately)</p>	<p>If the premises themselves carry out any work locally, which may include changes to the use of the building in which the water system is installed, then the PM is responsible for contacting Strategic Asset Management (non-schools)/ Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) to request a review of the LRA.</p> <p><i>**For schools that do NOT have a contractual arrangement in place with the Education Partnership and</i></p>	<p>If Strategic Asset Management carry out any work Corporately on behalf of the premises, which may include changes to the use of the building in which the water system is installed, then Strategic Asset Management / Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) will be responsible instigating a review of the LRA themselves.</p>

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	Criteria which would instigate a review:	Premises Manager (PM) to instigate the review	Strategic Asset Management to instigate the review
		<i>Skills team, then the school will be solely responsible for arranging for a review of the LRA to be carried out themselves **</i>	
c	The availability of new information about risks or control measures	Not applicable for PMs	If Strategic Asset Management / Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) became aware (via their competent person) or were provided with new information about risks or control measures then they would be responsible for instigating a review of the LRA themselves, as required. <i>**For schools that do NOT have a contractual arrangement in place with the Education Partnership and Skills team, then the school will be solely responsible for arranging for a review of the LRA to be carried out themselves**</i>
d	The results of checks indicating that control measures are no longer effective. (This will vary depending on whether the checks are done locally or corporately)	If the premises themselves identified that the results of their local checks indicated that the control measures were no longer effective, then the PM would be responsible for contacting Strategic Asset Management (non-schools)/ Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) to request a review of the LRA. <i>**For schools that do NOT have a contractual arrangement in place with the</i>	If Strategic Asset Management / Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) identified that the results of their checks (which are being done by a 3 rd party contractor) were no longer effective, then they would be responsible for instigating the review of the LRA on behalf of the premise.

	Criteria which would instigate a review:	Premises Manager (PM) to instigate the review	Strategic Asset Management to instigate the review
		<i>Education Partnership and Skills team, then the school will be solely responsible for arranging for a review of the LRA to be carried out themselves **</i>	
e	Changes to key personnel. (This will vary depending on whether the changes are done locally or corporately)	If there were local changes to key personnel that could impact on the current LRA then it would be the responsibility of the PM to notify Strategic Asset Management (non-schools)/ Education Partnership and Skills team (for schools who have a contractual arrangement in place with SSE) as soon as possible to request a review of the LRA.	If there were corporate changes to key personnel that could impact on the current LRA then it would be the responsibility Strategic Asset Management / Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property to instigate the review of the LRA as required. <i>**For schools that do NOT have a contractual arrangement in place with the Education Partnership and Skills team, then the school will be solely responsible for arranging for a review of the LRA to be carried out**</i>
f	A case of legionnaires' disease/legionellosis associated with the system.	If a PM is aware of a case of legionnaires' disease/ legionellosis associated with the water systems on their site, then it will be the responsibility of the PM to notify Strategic Asset Management (non-schools)/ Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) to request a review of the LRA immediately. <i>**For schools that do NOT have a contractual arrangement in place with the</i>	Not applicable as the premises will usually know this information before Strategic Asset Management /Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) are made aware of it.

	Criteria which would instigate a review:	Premises Manager (PM) to instigate the review	Strategic Asset Management to instigate the review
		<i>Education Partnership and Skills team, then the school will be solely responsible for arranging for a review of the LRA to be carried out; however, SC will still need to be notified of the outbreak**</i>	

In addition to the above criteria, SC Strategic Asset Management (non-schools) and the Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) also has a programme in place to automatically review all premises legionella risk assessments regularly, for which it is responsible. The programme is based on the type of establishment and the people within it.

The programme below has been agreed by the Council's responsible person who is designated at the time of writing on the [F02](#), which summarizes corporate H&S responsibilities / arrangements in Somerset Council.

Schools that do NOT have a contractual arrangement in place with the Education Partnership and Skills team will also be expected to adhere to and follow this programme.

The following High-Risk premises will be reviewed/ updated every 3 years:

- Residential facilities
- Premises with immune compromised residents
- Care Homes
- Middle and Secondary Schools
- Special Schools

The following Medium Risk premises will be reviewed/ updated every 5 years:

- Primary schools
- Other educational facility e.g., Pupil Referral Unit (PRU)
- Youth Centres
- Children's Centres

The following Low Risk premises will be reviewed/ updated every 7 years:

- Libraries
- Office environment

SC Strategic Asset Management (non-schools) and Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) are currently

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working to the above-mentioned programme; however, if there is a significant change as detailed in (a) – (f) above then the legionella risk assessment will be reviewed/ updated sooner, as required.

Premises Managers are also required to review their legionella risk assessment, at least annually, via the Civica website, or sooner should significant change occur to the building or activities carried out. The CHSU, Strategic Asset Management and the Education Partnership and Skills team (for schools who have a contractual arrangement in place with Education Property) will automatically be notified of any negative responses to your annual review which may result in a new legionella risk assessment being carried out.

Additionally, any new premises which SC takes on/ has control over, SC Strategic Asset Management will automatically request a new legionella risk assessment to be carried out.

13 Construction Works and Legionella

Where any construction works are carried out on an SC managed/ occupied site, the person responsible for managing the project must consider the consequences of the work in relation to the sites current Legionella Risk Assessment (LRA). Typically, the following works would require a review / update of the site LRA:

- a) Internal remodelling involving removal, modification of existing water system and/or installation of new water systems.
- b) Any new construction works which involve removal / modification of existing water system and/or installation of new water systems.
- c) Decommissioning / removal of existing water systems.
- d) Replacing existing water system pipework or components with new.
- e) Installation of new water system pipework or components.

Historically, changes to water systems have been identified through a scheduled review potentially leaving a period of time where the LRA is out of date. SC now requires a pro-active approach to water system changes. It is a requirement of SC's Legionella Policy that where any works to water systems are carried out, as part of the works, a review of the existing LRA is undertaken and where required, the LRA is updated to reflect the new water system. It is also a requirement that the project budget funding the actual works also funds the LRA review and update.

Following completion of the site works, the person managing the project must initiate and ensure that an updated LRA is produced.

For SC Corporate Properties (non-schools), the LRA update shall be carried out by SC's appointed legionella risk assessment contractor.

The process for non-schools is initiated by completing the proforma shown in form F19a which is then returned to:

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- Dave Dangerfield (SC Building Services Advisor – Strategic Asset Management) He can be contacted on: 01823 356857/ 07768 801683 or email: dave.dangerfield@somerset.gov.uk

For schools who have a contractual arrangement in place with the Education Partnership and Skills team the LRA update shall be carried out, by your chosen contractor, in line with the package that you purchase.

The process for schools (who have a contractual arrangement in place with the Education Partnership and Skills team) is initiated by completing the proforma shown in form F19a which is then returned to:

- Education Property will provide support and advice to schools and other educational establishments, who buy their services, only. The admin team contact details are: 01823 355358 or email: property@somerset.gov.uk

The following information must be recorded on the proforma:

- a) A brief description of the works relating to the water system
- b) An annotated plan showing the areas of works relating to the water system changes / additions (for larger construction projects, design drawings are acceptable)
- c) Where any existing water related assets have been removed, for example, boilers, thermostatic mixing valves, water heaters, etc, identify the respective asset reference(s)
- d) Cost centre and general ledger codes so that the works can be recharged to the appropriate budget holder.

Upon receipt of the completed proforma, an order will be raised to review and update (where necessary) the LRA.

Schools that organise their own LRA's are responsible for arranging an updated LRA following completion of relevant works.

14 References and links

The following Somerset Council policy documents are directly relevant to this guidance, and are referenced within this document:

- HS19 Legionella Policy
- F19a Legionella Risk Assessment (LRA) Review & Update Request Form
- [HS29 Retention of Documents](#)

The following external links are also available, for further reference and additional guidance:

- [Blackboard schools training](#)
- [The Learning Centre corporate training](#)
- [Training presentation](#)

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- [Legionnaires' disease - Technical guidance HSG 274 parts 2 and 3](#)
- [Legionnaires' disease - The control of legionella bacteria in water systems L8 ACoP](#)
- [HSE Legionella and legionnaires' disease](#)
- [Civica Property](#)

Review and Revision

This Guidance will be reviewed as it is deemed appropriate, but no less frequently than every 36 months. Guidance review will be undertaken by rolling programme established by the CHSU and agreed by the Health, Safety, and Wellbeing Steering Group.

Version History

Revision Date	Author	Version	Description of Revision
		V1.0	New guidance

Issued by: The Corporate Health and Safety Unit

Issued Date: DRAFT TBC



Somerset
Council

HS19

Legionella Policy.

Organisation	Somerset Council
Title	Legionella Policy HS19
Author	Pam Price
Owner	The Corporate Health & Safety Unit
Protective Marking	OFFICIAL - Unclassified
Primary Legislation	Health and Safety at Work etc. Act 1974 and The Control of Substances Hazardous to Health Regulations 2002

Policy on a Page

This policy is aimed at those in control of premises to help them to comply with their legal duties in relation to legionella.

Somerset Council will protect all employees whilst at work, and others who may be affected by work activities, against the risks associated with legionella.

To comply with the above, this policy provides the Council's rules that must be followed, the standards to be maintained, and signposts to further guidance. It also highlights the risks to users, clients and the Council and the potential consequences of breaching this policy.

This document will be available to: **All Elected Members, Somerset Council Staff, and Volunteers.**

Key Messages

- Somerset Council will identify and assess the risk of Legionnaires' disease in all premises, for which it is responsible.
- Premises Managers must ensure that their responsibilities, as specified in the legionella risk assessment, are complied with (these responsibilities may also be contracted to a third party).
- Premises Managers must also ensure that Legionella Training is completed by anyone who needs to understand the topic (i.e., anybody undertaking responsibilities to comply with the risk assessment).
- Premises Managers are also required to review their legionella risk assessment via the [Civica website](#), at least annually, or sooner if a significant change occurs to the building or the activities carried out.

This "policy on a page" is a summary of the detailed policy and guidance documents, please ensure you read, understand, and comply with the full arrangements stated.

Responsibilities

Somerset Council	Premises Managers
Employees	SC Strategic Asset Management Client
SC Education Property <i>(for schools who have a contractual arrangement in place with the Education Partnership and Skills team)</i>	Local Authority Maintained Schools <i>(who do NOT have a contractual arrangement in place with the Education Partnership and Skills team)</i>
Somerset Council Housing Service (SCHS)	Corporate Health & Safety Unit
The Responsible Person	

Somerset Council (SC) will:

Complete the following for all premises over which it has control:

- Identify the Chief Executive as the Duty Holder in relation to the risk from legionella.
- Appoint one or more persons to be managerially responsible for the overall management of the risk from legionella.
- Ensure that the risk control measures for legionella are managed locally by an identified premises manager.
- Identify and assess the risks of Legionnaires' disease in its premises.
- Prepare plans or schemes to ensure that the risks are controlled and put that plan into action (to include appropriate programmes of maintenance and disinfection).
- Keep records and check that what has been done is effective.

Additionally, the Council will:

- Ensure that all premises managers have received appropriate information, instruction, and training so they can implement the plans outlined in the risk assessments.
- Consider the risk from legionella when designing control measures in relation to the risk of scalding.

Premises Managers will:

- Make themselves familiar with the contents of both the legionella risk assessment and any associated monitoring records, ensuring that these are stored safely, and that staff are aware of their location.
- Ensure that the responsibilities for Premises Managers, specified in the legionella risk assessment, are complied with (These responsibilities may be contracted out to a 3rd party).

- Be required to review their legionella risk assessment, at least annually via the Civica website, or sooner if a significant change occurs to the building or the activities carried out.
- Contact the CHSU if their legionella risk assessment requires a full review (following the criteria in the annual review).
- Ensure that all legionella checks are recorded in writing, signed, and dated.
- Keep all records for a minimum of 6 years.
- Ensure that Legionella Training is completed by anybody who needs to understand the topic (i.e., anybody undertaking responsibilities to comply with the risk assessment). Training is delivered in the form of Premises Managers Training and is also available via the Legionella Presentation on Blackboard (Schools) or a module on The Learning Centre (Non-schools).
- Ensure that, if they carry out any work locally, which may include changes to the water system or it's use, they contact either Strategic Asset Management (Non-schools) or Education Property (for Schools who have a contractual arrangement in place with the Education Partnership and Skills team) as soon as possible to request a review of the legionella risk assessment.

local authority-maintained schools who do not have a contractual arrangement in place with Education Property will be responsible for arranging a review of their legionella risk assessment themselves

- Ensure that, if they carry out any work locally, which may include changes to the use of the building in which the water system is installed, they contact either Strategic Asset Management (Non-schools) or Education Property (for Schools who have a contractual arrangement in place) as soon as possible to request a review of the legionella risk assessment.

local authority-maintained schools who do not have a contractual arrangement in place with Education Property will be responsible for arranging a review of their legionella risk assessment themselves

- Ensure that, if they identify that the results of their local checks indicate that the control measures are no longer effective, they contact either Strategic Asset Management (Non-schools) or Support Services for Education (for Schools who have a contractual arrangement in place with Education Property) as soon as possible to request a review of the legionella risk assessment.

local authority-maintained schools who do not have a contractual arrangement in place with Education Property will be responsible for arranging a review of their legionella risk assessment themselves

- Ensure that, if there were local changes to key personnel that could impact on the current legionella risk assessment, they contact either Strategic Asset Management (Non-schools) or Education Property (for Schools who have a contractual arrangement in place) as soon as possible to request a review of the legionella risk assessment.

local authority-maintained schools who do not have a contractual arrangement in place with Education Property will be responsible for arranging a review of their legionella risk assessment themselves

- Ensure that, where a case of legionnaires' disease/ legionellosis, associated with the premises water system/s is made known, they contact either Strategic Asset Management

(Non-schools) or Education Property (for Schools who have a contractual arrangement in place) as soon as possible to request a review of the legionella risk assessment.

local authority-maintained schools who do not have a contractual arrangement in place with Education Property will be responsible for arranging a review of their legionella risk assessment themselves

Employees will:

- Report concerns to a responsible person, if concerned about the risk of an outbreak, so that appropriate measures can be taken to eliminate or reduce the risks.

SC Strategic Asset Management Client will:

- Appoint an approved contractor(s), to carry out a legionella risk assessment, for all non-school premises over which SC has control.
- Instruct an approved contractor(s), as to when a legionella risk assessment is required, for all non-school premises over which SC has control.
- Consider all new legionella risk assessments, in non-school premises, and plan the remedial work required.
- Appoint an approved contractor(s), to carry out the legionella maintenance/ remedial work which arises from any legionella risk assessments carried out, for non-school premises over which SC has control.
- Ensure that the contractor(s) performing the legionella maintenance and monitoring activities, on the individual water systems in non-school premises, carry out the works as specified in each SC establishment legionella risk assessment (non-schools only).
- Hold and manage the budget for legionella risk assessment, in non-school premises, and any associated legionella remedial/ maintenance and monitoring activities.
- Address remedial work identified under LRA inspections. Following the production of a LRA by the appointed competent contractor, identified risks shall be addressed in the following timescales:
 - Remedial work identified as **high risk** to be actioned with 20 working days of report being issued to Somerset Council.
 - Remedial work identified as **medium risk** to be actioned with 40 working days of report being issued to Somerset Council.
 - **Low risk** works are for awareness/ periodic review only.

Exceptional circumstances:

High / medium risk works which involve a large degree of planning and management e.g., replacement of water tanks in roof spaces, are to be flagged as 'work in progress' and to be actively managed in a suitable timescale (with an agreed target date) but to acknowledge the 20-working day target may not be met.

- Ensure that a suitable legionella risk assessment is in place, prior to occupancy, when taking over new or existing premises (for all new schools and for new or existing non-schools).

- Take responsibility for the management of the legionella risk in unoccupied premises where there is no nominated premises manager (both for schools over which SC has control and for non-schools).
- Consider the minimising of the risk from legionella as a design requirement in all new builds/ refurbishments (both for schools over which SC project manages and for all non-schools).
- Ensure that, if they carry out any work Corporately on behalf of a non-school premise, which may include changes to the water system or it's use, then they will be responsible for automatically instigating a review of the legionella risk assessment on behalf of the non-school premise concerned (Complete form F19a).
- Ensure that, if they carry out any work Corporately on behalf of a non-school premise, which may include changes to the use of the building in which the water system is installed, then they will be responsible for automatically instigating a review of the legionella risk assessment on behalf of the non-school premise concerned (Complete form F19a).
- Ensure that, if/when the availability of new information about risks or control measures arise, then they will be responsible for automatically instigating a review of any legionella risk assessment/s, in all non-school premises, as required.
- Ensure that, if they identify that the results of their local checks (which are being done by a 3rd party contractor) indicate that the control measures are no longer effective, then SC Strategic Asset Management Client will be responsible for instigating a review of the legionella risk assessment for the non-school premises concerned, as required.
- Ensure that, if there were corporate changes to key personnel that could impact on the current legionella risk assessment in non-school premises, then they will be responsible for automatically instigating a review of any legionella risk assessment/s as required (this will be identified via the legionella annual review form on Civica which has to be completed by all premises managers on an annual basis).

- Oversee the working management of Legionella in Somerset Council:

The Legionella Working Group has been set up to provide a forum in which to maintain an ongoing dialogue around legionella issues. It's terms of reference include:

- Review Somerset Council's Legionella policy in practical terms to maintain its fit for purpose and currency status.
- Review legionella compliance data.
- Review performance of delivery partners for legionella works.
- Discussion forum for sharing knowledge, problems and resolutions relating to the management of legionella.

The group is attended by responsible persons and key staff who have control or influence over the day-to-day management of legionella for the Council.

SC Education Property will: *(this applies only where the Education Partnership and Skills team have a contractual arrangement in place with a school)*

- Appoint an approved contractor(s), to carry out a legionella risk assessment, for all school premises who buy their services.

- Instruct an approved contractor(s), as to when a legionella risk assessment is required, for all school premises who buy their services.
- Consider all new legionella risk assessments, in school premises, and plan the remedial work required for those who buy their services.
- Appoint an approved contractor(s), on behalf of the school, to carry out the legionella maintenance/ remedial work which arises from any legionella risk assessments carried out, for those who buy their services.
- Ensure that the contractor(s) performing the legionella maintenance and monitoring activities, on the individual water systems in school premises, carry out the works as specified in each SC establishment legionella risk assessment (for those who buy their services).
- Consider the minimising of the risk from legionella as a design requirement in all school refurbishments and construction projects where Education Property are carrying out this work on behalf of the school.
- Ensure that, if they carry out any work Corporately on behalf of a school premise, which may include changes to the water system or it's use, then they will be responsible for automatically instigating a review of the legionella risk assessment on behalf of the school premise concerned (Complete form F19a).
- Ensure that, if they carry out any work Corporately on behalf of a school premise, which may include changes to the use of the building in which the water system is installed, then they will be responsible for automatically instigating a review of the legionella risk assessment on behalf of the school premise concerned (Complete form F19a).
- Ensure that, if/when the availability of new information about risks or control measures arise, then they will be responsible for automatically instigating a review (subject to approval by the Sites responsible person) of any legionella risk assessment/s, in all school premises who buy their services, as required.
- Ensure that, if they identify that the results of their local checks (which are being done by a 3rd party contractor) indicate that the control measures are no longer effective, then Education Property will be responsible (subject to approval by the Sites responsible person) for instigating a review of the legionella risk assessment for the school premises concerned (only those who buy their services), as required.
- Ensure that, if there were changes to key personnel that could impact on the current legionella risk assessment in school premises (who buy their services), then they will be responsible for automatically instigating a review of any legionella risk assessment/s as required (this will be identified via the legionella annual review form on Civica which has to be completed by all premises managers on an annual basis).

Local Authority Maintained Schools (who do NOT have a contractual arrangement in place with the Education Partnership and Skills team) will:

- Hold and manage the budget for legionella risk assessment, in their school premises, and any associated legionella remedial/maintenance and monitoring activities.
- Appoint their own approved contractor(s), to carry out their own legionella risk assessment, in line with SC policy.

- Appoint their own approved contractor(s), to carry out the legionella maintenance/remedial work which arises from any legionella risk assessments carried out, in line with SC policy.
- Ensure that their legionella risk assessment is formally reviewed in accordance with SC policy (refer to frequently asked questions section for frequencies).
- Ensure that the contractor(s) performing the legionella maintenance and monitoring activities, on the individual water systems in their school premise, carry out the works as specified in their legionella risk assessment, in line with SC policy.
- Pay for their own legionella risk assessment and any associated legionella remedial/maintenance and monitoring activities.
- Ensure that, if they carry out any work on the premise, which may include changes to the water system or its use, then they will be responsible for automatically instigating a review of their legionella risk assessment.
- Ensure that, if they carry out any work on the premise, which may include changes to the use of the building in which the water system is installed, then they will be responsible for automatically instigating a review of their legionella risk assessment.
- Ensure that, if/when the availability of new information about risks or control measures arise, then they will be responsible for automatically instigating a review of their legionella risk assessment.
- Ensure that, if they identify that the results of their local checks indicate that the control measures are no longer effective, then they will be responsible for instigating a review of the legionella risk assessment.
- Ensure that, if there were changes to key personnel that could impact on the current legionella risk assessment in their premise, then they will be responsible for automatically instigating a review of any legionella risk assessment/s as required (this will be identified via the legionella annual review form on Civica which has to be completed by all premises managers on an annual basis).
- Consider the minimising of the risk from legionella as a design requirement in any refurbishment and construction work that they self-manage or carry out themselves.

Somerset Council Housing Service (SCHS) will:

- Meet its duty to manage the control of legionella and other water related bacteria within its asset portfolio.
- Ensure that suitable and sufficient water hygiene risk assessments, in accordance with L8, are undertaken at appropriate intervals. The findings will be recorded, and necessary remedial work undertaken in accordance with the predefined timescales within the Water Hygiene Procedures (WATHS02).
- Ensure that residents are appropriately informed through specific information provided at the outset of their tenancy on how they can minimise the risks of water hygiene bacteria.
- Ensure that residents who have special needs in relation to water hygiene have been assessed and any extra controls implemented.

- Ensure it provides water hygiene safety information, operational policies and procedures, training, instruction and supervision to enable staff and contractors to perform their work safely and efficiently.
- Appoint designated staff and ensure that adequate funding and resources are available to carry out their duties.
- Ensure that adequate and regular water hygiene checks, servicing and maintenance of stored water and their associated water systems are carried out within appropriate timescales.
- Liaise with partner organisations where the activities of these organisations may affect the water hygiene safety of Somerset Council Housing Service staff, tenants, leaseholders, contractors and visitors who use our services and where the activities of the Council may affect the activities of the other organisations.
- Record all temperature monitoring and review for any possible trends and implement appropriate actions as required.

The Corporate Health and Safety Unit (CHSU) will:

- Provide suitable training for Premises Managers. (This will be via a Legionella presentation located on Blackboard or training module on TLC)
- Maintain, communicate, and audit compliance with this policy.
- Review this policy at intervals not exceeding 3 years.

The Responsible Person:

The Health and Safety Executive (HSE) Approved Code of Practice L8 – Legionnaires' disease (The Control of Legionella Bacteria in Water Systems) requires the duty holder to specifically appoint a competent person to take day-to-day responsibility for controlling any identified risk from legionella bacteria, known as the 'Responsible Person'.

Due to the multi-site nature of SC, this requirement will be met on a collective basis – the duties being shared between the Strategic Asset Management Client (non-schools), Support Services for Education (for schools who have a contractual arrangement in place with the Education Partnership and Skills team), local authority-maintained schools (who do not have a contractual arrangement in place with the Education Partnership and Skills team), Somerset Council Housing Services and Individual Premises Manager at site level.

For the purposes of this policy, the Corporate Responsible Person will be as follows:

- SC Strategic Asset Management Client - for all non-school premises.
- SC Education Property (the Education Partnership and Skills team) – for all schools who have a contractual arrangement in place.
- Local authority-maintained schools (who do not have a contractual arrangement in place with the Education Partnership and Skills team – the responsible person is the school.

The name of the nominated Corporate Responsible Person, for both schools and non-schools, for all premises under the control of SC, is contained within the [Corporate F02](#).

The Corporate Responsible Person will have:

- A thorough understanding of their duties and the overall health and safety management of the organisation, its policies and organisational structure.
- A detailed understanding of any service providers' commitments as detailed in the Legionella Control Association (LCA) code of practice.
- The ability to influence the selection and appointment of service providers with the correct level of training and competence to be able to undertake the roles contracted to them.

The Corporate Responsible Person will work with local Premises Managers and others with responsibilities in this risk area to:

- Ensure that all legionella risk assessments are reviewed, at least annually, via the Civica website, or sooner if a significant change occurs to the building or activities carried out.
- Ensure that measures are in place to adequately control legionella risks posed by hot and cold-water systems, with support from the CHSU.
- Always ensure effective communication with the Duty Holder regarding all aspects of the legionella risk management programme.
- Ensure effective communication, to all staff involved in the legionella risk management programme, which supports the full execution of any written scheme of precautions necessary to minimise the risk of legionella proliferation in the areas under their control.
- Ensure that all staff have the correct levels of competence and training suitable for their appointed roles in the legionella risk management programme, with support from the CHSU.
- Provide sufficient authority, competence and knowledge of the water systems present on SC controlled sites to ensure that the appropriate operational procedures are carried out in a timely and effective manner. (For schools who buy their services from the Education Partnership and Skills team they cannot action works without the school's financial approval first.

Governance Arrangements

Policy Compliance

If any employee is found to have breached this policy, they may be subject to Somerset Council's [disciplinary procedure](#).

Policy Governance

The following table identifies who within Somerset Council is Accountable, Responsible, Informed or Consulted with regards to this policy. The following definitions apply:

- **Responsible** – the person(s) responsible for developing and publishing the policy.
- **Accountable** – the person who has ultimate accountability and authority for the policy.
- **Consulted** – the person(s) or groups to be consulted prior to final policy implementation.
- **Informed** – the person(s) or groups to be informed after policy implementation.

Responsible	Corporate Health and Safety Unit
Accountable	Chief Executive
Consulted	LGR JNF Union Group, Health, Safety and Wellbeing Steering Group (HSWSG) and HR Committee
Informed	All members, employees, and volunteers

Review and Revision

This policy will be reviewed as it is deemed appropriate, for instance when there is a change in statutory requirements and/or HSE guidance is revised, but no less frequently than every 36 months. Policy review will be undertaken by rolling programme established by the CHSU and agreed by the Health, Safety, and Wellbeing Steering Group.

Version History

Revision Date	Author	Version	Description of Revision
16/02/2016	Fiona Packer	V1.0	Draft Version
11/05/2016	Fiona Packer	V2.0	First Revision
17/05/2016	Fiona Packer & Brian Oldham	V3.0	Final Revision
09/06/2016	Fiona Packer	V4.0	Final Revision
14/09/2016	Fiona Packer	V5.0	Final Revision
24/01/2017	Fiona Packer	V6.0	Final Revision
27/02/2017	Fiona Packer, Trevor Shortman & David Dangerfield	V7.0	Final Version
08/06/2018	Fiona Packer, Helen Acreman & David Dangerfield	V8.0	Draft Revision

10/07/2018	Fiona Packer, Helen Acreman & David Dangerfield	V9.0	Final Version
11/12/2018	Fiona Packer, Helen Acreman & David Dangerfield	V10.0	Final Version
25/05/2021	Julie Rutter, Helen Acreman & David Dangerfield	V11.0	Final Version
04/08/2021	Julie Rutter, Helen Acreman & David Dangerfield	V12.0	Minor changes relating to named contractor.
20/04/2022	Julie Rutter, Helen Acreman & David Dangerfield	V13.0	Minor changes to reflect legionella training; added information about alternative heating sources and legionella management in these systems.
	Pam Price, Helen Acreman & David Dangerfield	V14.0	Removal of RAMIS references, addition of addressing remedial work identified under LRA inspection and Somerset Council Housing Service responsibilities.

Document Notification

Approval	Name	Date
Corporate H&S Advisor	Daniel Thomas	
Service Director Strategic Asset Management	Oliver Woodhams	
Executive Director of Strategy Workforce and Localities	Alyn Jones	
HR Committee	Committee	

Audit Objective





To provide advice on the Council’s strategic arrangements in place to oversee corporate H&S risks in line with HSE’s guidance on leading H&S Management.

Assurance Opinion	Number of Actions		Risks Reviewed	Assessment
	Priority	Number		
<h2>Advisory</h2>	Priority 1	-	Following the Local Government Reorganisation process, the new Council does not have an embedded health and safety culture which in turn impacts on the Council’s ability to achieve its health and safety objectives.	High
	Priority 2	5		
	Priority 3	-		
	Total	5		

Background and Scope

This review has undertaken a high-level view of H&S governance at the newly formed Somerset Council, with a focus on understanding the culture towards H&S within the new Authority. To achieve this we undertook a high-level review of some of the governance arrangements that were in place and obtained an assessment on culture through a survey that was issued to all staff. A separate report summarising the survey results has been shared with management. We developed questions through reading HSE guidance and has been themed according to what HSE state is the largest influences on safety culture ([HSE – Organisational Culture](#)). Survey results were compared with our high-level view of governance and findings have been reported as part of appendix 1 together with actions to be undertaken.

Reportable findings

	A new Health and Safety Governance structure has been agreed by the Health, Safety, and Wellbeing Steering Group (HSWSG), however this was still not fully in operation at the point of undertaking this audit. As part of the new governance arrangements, the Human Resources Committee will have Member oversight for H&S however they had not received any updates since the formation of the new Council resulting in very minimal Member oversight of H&S arrangements at the Council. The H&S Manager has confirmed that he is engaging with the relevant portfolio holder, which ensures there is some involvement.
	The H&S policies available on the intranet, whilst some have been updated for the new Council, others still require updating to reflect changes to the governance structure such as having the HSWBs. The responsibilities document should be reviewed to ensure it reflects expected outcomes, for example it includes the requirement for the H&S Champion to prepare a six-monthly report for the Audit Committee on H&S performance, but this is not currently happening. We also identified out of date H&S information on two office walks in Deane House, where H&S notice board is out of date and at County Hall where a floor plan dated Sep’88 was on the wall showing locations of fire safety equipment. Despite some documents needing updating we did find that there is clear signposting online to H&S advice and signposting to the H&S team.
	There are no health and safety performance indicators included in corporate performance reporting or targets for the management of health and safety at Somerset Council. We were advised that some H&S information on Fire Risk Assessment compliance and accidents is shared with the Health, Safety and Wellbeing Steering Group, wider performance information is not shared within the Council’s performance management framework. It is intended to develop performance reporting further within the new HSWBs.
	Although the Council has recently set up management health and safety training together with training on risk assessments, there is currently no monitoring of staff completion rates or escalation for when staff do not complete the courses. It is intended to monitor training through the health and wellbeing boards once fully established. There has not been any Health and Safety training for Members delivered by the Health and Safety team. The H&S team is aware of the need and wants to move this forward but have not been able to get this prioritised with Democratic Services.

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High level survey findings

Observations from staff survey

Survey results across five themes showed the most favourable responses were for 'Compliance with procedures' with the least favourable being 'Communication.' The most negatively answered question was on 'Reports showing the Council's H&S Performance are shared with staff' which 37% of staff disagreed with, 21% also disagreed with the statement 'I receive periodic training on H&S.' Most positively, 88% of staff agreed with the statement that they 'are comfortable with raising any H&S issues.'

Analysing results across legacy organisations, directorates and offices shows a very mixed view. For example, 58% of respondents based at Colley Lane answered negatively to the statement 'there is a strong and active commitment from senior managers towards H&S' compared with the 16% collectively – the legacy Council staff of Sedgemoor also had a similar score with 41% answering negatively and Communities as a directorate with 35%.

Theme	Question	Average score (LOW -2 to 2 HIGH)
Employee Involvement	I am comfortable with raising any health and safety related issues.	1.53
Employee Involvement	I always report safety incidents.	1.47
Compliance with procedures	I am aware of the relevant health and safety procedures for my role.	1.45
Training and competence	I feel confident and competent to manage health and safety issues within my role.	1.43
Compliance with procedures	I feel safe working for Somerset Council.	1.39
Management Commitment and Style	My manager treats health and safety matters with importance.	1.22
Compliance with procedures	I do not see regular violations of health and safety practice within my work.	1.2
Organisational learning	I feel like Health and Safety is important at Somerset Council	1.17
Employee Involvement	I feel able to be involved in managing health and safety risks.	1.14
Employee Involvement	I know where to access Health and Safety advice.	1.14
Employee Involvement	I know where to report any H&S issues.	1.12
Training and competence	I have received health and safety training relevant to my role. E.g. safe working procedures	1.1
Compliance with procedures	I am confident that the health and safety risks in my area have been properly defined and are being managed.	1.03
Employee Involvement	I can easily access the H&S policies and relevant procedures for my work.	0.98
Management Commitment and Style	I believe senior management will take any H&S issues I raise seriously.	0.94
Organisational learning	I believe the Council learns from past health and safety incidents	0.89
Communication	I feel that Somerset Council promotes both physical and mental health and safety.	0.86
Communication	Managers communicate with us and listen to us about health and safety	0.85
Communication	The organisation keeps me up to date on H&S matters.	0.83
Management Commitment and Style	I believe that senior management are committed to ensuring any health and safety issues are quickly resolved.	0.82
Communication	Health and Safety is discussed periodically within team meetings.	0.74
Management Commitment and Style	There is a strong and active commitment from senior managers towards H&S.	0.72
Training and competence	I receive periodic training on health and safety.	0.7
Management Commitment and Style	Senior managers visibly follow H&S practice.	0.68
Communication	Reports showing the Council's Health and Safety performance are shared with staff.	-0.05

Question Theme	Average score
Compliance with procedures	1.27
Employee Involvement	1.23
Training and competence	1.08
Organisational learning	1.03
Management Commitment and Style	0.87
Communication	0.65

Answers	Scores
Agree	2
Slightly Agree	1
Neutral	0
Slightly disagree	-1
Disagree	-2

Across all themes, Compliance with Procedures and Employee Involvement were highest and potentially shows staff engagement towards health and safety matters is relatively positive albeit with some room for improvement. Management Commitment and Style as well as Communication are areas for most development based on the survey results and highlights the need for the clear golden thread within the organisation on health and safety matters, this finding may also link to our review findings of there being no corporate performance information on H&S and minimal reporting to Members.

Finding 1.1 – New H&S Governance arrangements not fully embedded

Whilst there is a new Governance Structure in place for H&S that is designed to work across directorates, there is a need to define the Council’s own Health and Safety Strategy assessing where it currently is, where it wants to be and, importantly, how it intends to get there whilst also understanding the variety of H&S risks that the organisation has to contend with. The new Governance Structure was not fully embedded at the point of this review and therefore it was not possible to assess how effective it will be in practice.

We also found very little Member involvement in H&S, with H&S reports not yet being shared with Members at the Human Resources Committee or Audit Committee (which was referenced in one of the H&S documents). At close-out the Strategic Manager - Health and Safety also advised that engagement from staff across the boards is also inconsistent. Our survey also indicated low scores for Communication and Management Commitment & Style indicating a need to have a clear strategy (as referenced above) with a Tone at the Top cascaded through the organisation. Whilst the directorate boards can support in this, without proper engagement and management buy-in their effectiveness will be undermined. There is the opportunity with development of a H&S strategy to ensure there is clearly defined H&S Leadership within and across the organisation (from both Members and Senior Managers) that will also support the achievement of objectives within the Boards.

The strategy should help define where the Council is, what the Council’s objectives are and should reflect the resource requirements needed to deliver those objectives including whether resource is provided through in-house provision and specialists, or outsourced.

Action

Due to a number of vacancies in the team and a need to restructure the service following LGR and this is the immediate priority in order to start mitigating against health and safety risk.

Whilst there is a need to develop a strategy, focus can only be put on this once a team is in place and managing the current tasks. The initial thoughts on strategy would be to develop a strategy that is in line with the HSE’s Plan, Do, Check, Act approach. – **Timescale - October 2024**

Until H&S Strategy is in place, work with the Executive Director – Strategy, Workforce and Localities and wider CLT on ensuring there is a clear tone at the top on Health and Safety within the organisation including support for ensuring the objectives of the Health and Wellbeing Boards are overseen and delivered. Agree Standard Operating Principles and Terms of Reference through ELT for how Health and Safety is overseen and managed across Directorates within the organisation including escalation principles. – **Timescale April 2024**

Priority	2	SWAP Reference	
Responsible Officer	Strategic Manager - Health and Safety		
Timescale	October 2024		

Finding 1.2 – No corporate performance reporting on H&S Performance

There is currently no corporate performance reporting on health and safety, meaning that Health and Safety performance is not being actively shared with senior managers or Members. Although the Human Resources committee now has Member oversight for H&S, at the point of testing there was no H&S performance being shared with this group.

There are also no targets in place to assess performance against, and as part of developing a Health and Safety strategy these should be considered.

One of the negatively scored survey responses was regarding H&S performance information being shared with staff. Ensuring that H&S performance is captured as part of corporate performance information (and being shared as part of this through the organisation) would help in this area.

Action

There is some initial information being shared with the HSWBs on Health and Safety, so information is now being shared within the new governance structures. SWAP will support in engaging within their partnership on what Corporate H&S KPIs are measured and used in other Councils.

The H&S Manager will engage with the Performance Lead at Somerset Council to understand priorities and where H&S can fit. Timescale has been set for March to review potential KPIs, and understanding of corporate performance process but acknowledge KPIs may roll out later to allow time for data collection.

Priority	2	SWAP Reference	
Responsible Officer	Strategic Manager - Health and Safety		
Timescale	March 2024		

Finding 1.3 – No monitoring and reporting on H&S Training completion	Action	
<p>The SC H&S lead has identified a number of mandatory courses for H&S which was pending approval when undertaking this audit. Whilst there is training available on the Learning Management System, completion rates are not monitored or reported upwards and there is no accountability where staff have not completed training. We were also informed that current Members have also not received H&S training, although the H&S team have been liaising with Democratic Services to resolve this.</p> <p>The survey also indicated a low score for staff receiving periodic H&S training. Ensuring there are periodic courses that are monitored will reinforce staff responsibilities and organisational expectations on the management of H&S.</p>	<p>The H&S Service delivered four briefings to Elected Members during September/October. A recording was taken which was added to the learning requirements of elected members who were unable to attend the sessions. The training sessions address the following topics:</p> <ul style="list-style-type: none"> • Handling Intimidation • Mental Health and Wellbeing • Personal Safety and Security • Personal Callers to Councillors Private Homes • Attendance at Organised Meetings • General Car Safety and Parking • Demonstrations • Handling Intimidation • Mental Health and Wellbeing • Personal Safety and Security • Personal Callers to Councillors Private Homes • Attendance at Organised Meetings • General Car Safety and Parking • Demonstrations <p>The roll out of health and safety training for staff is dependent on other services.</p> <p>We've proposed to Organisational Development that once the courses are approved, OD should generate notifications informing staff of their required learning, we would then regularly report training completion rates at the Boards.</p> <p>Monitoring of completion can only be completed once the training is approved and available. Therefore, a longer timescale has been added to this to allow time for staff to complete before monitoring can commence.</p>	
<p>Priority</p>	<p>2</p>	<p>SWAP Reference</p>
<p>Responsible Officer</p>	<p>Strategic Manager - Health and Safety</p>	
<p>Timescale</p>	<p>October 2024</p>	

<p>Finding 1.4 – Some H&S information is out of date or not available</p>	<p>Action</p>														
<p>The forming together of a single Authority has created significant challenges, with each organisation having differing approaches to H&S, different levels of maturity and numerous different policies. Our review highlighted that some of these were not fully up to date e.g. one policy referring to reporting H&S performance to the audit committee. Whilst we thought the H&S were easily accessible on the Somerset Council intranet, the survey results highlight a need to increase awareness of policies and procedures. The question, ‘I can easily access the H&S policies and relevant procedures for my work,’ scored 0.98 and 39% of lone workers did not know if their role had been risk assessed.</p> <p>From attendance in two office sites, we also found examples of documentation that was not up to date. In Deane House there was a H&S notice board which had information focussed on Somerset West and Taunton Council including contacts in the H&S Committee and out of date insurance. In County Hall we identified a floor plan which had a date of ‘SEP88’ which showed the locations of fire safety equipment, the floor plan did not reflect the current open office layout.</p>	<p>Staff will be undertaking investigations in main offices on a periodic basis and will report back. However, it is noted that by undertaking these reviews that additional actions may be identified that need to be updated.</p> <p>We have developed a policy review forward plan. In doing so, we have informed the Steering Group, Subordinate Boards and HR Committee that the forward plan is 'live' and reflects our best endeavour intentions, but we have had to caveat that owing to our resources, changes in organisational priorities etc, policy reviews may be delayed. The policy review/consultation process takes 13 weeks from the point I receive a drafted policy from one of the team. The policies must be approved by HR Committee who meet four times a year. Therefore, given our current priorities and limited resourcing, reviewing all policies will take up to 24 months. Target date has been set in line for completion of full review.</p> <table border="1" data-bbox="1131 702 2116 853"> <tr> <td data-bbox="1131 702 1377 750">Priority</td> <td data-bbox="1377 702 1624 750" style="background-color: #FFD700;">2</td> <td data-bbox="1624 702 1859 750">SWAP Reference</td> <td data-bbox="1859 702 2116 750"></td> </tr> <tr> <td data-bbox="1131 750 1377 798">Responsible Officer</td> <td colspan="3" data-bbox="1377 750 2116 798">Strategic Manager - Health and Safety</td> </tr> <tr> <td data-bbox="1131 798 1377 853">Timescale</td> <td colspan="3" data-bbox="1377 798 2116 853">October 2025</td> </tr> </table>			Priority	2	SWAP Reference		Responsible Officer	Strategic Manager - Health and Safety			Timescale	October 2025		
Priority	2	SWAP Reference													
Responsible Officer	Strategic Manager - Health and Safety														
Timescale	October 2025														

<p>Finding 1.5 – Experience of H&S is inconsistent across the organisation</p>	<p>Action</p>														
<p>The survey highlighted that the experience of H&S is inconsistent across the organisation, and there will be challenges to build a single culture and approach to H&S matters at the Council. This will not be unique to Health and Safety.</p> <p>The survey results were also analysed at Directorate, Legacy Organisation, Office Location and Lone Worker status for each question to help understand where there are inconsistencies across the organisation and potential areas to prioritise. Two of the weaker areas were relating to ‘Management Commitment and Style’ and ‘Communication’ and addressing these two areas may also support in building a single shared culture within Somerset Council.</p> <p>There may be an opportunity to utilise the new HSWBs to review survey results in their own areas to better understand the responses and propose actions to be taken.</p>	<p>The results of the survey can be shared with the Steering Group for wider discussion and action setting.</p> <p>Ensure the structure and design principles for the H&S service are agreed as well as ensuring that health and safety is factored into individual service design across the organisation. The planned structure would ensure there is sufficient officer support for the directorates within the Council that would support in improving health and safety communication and engagement.</p> <table border="1" data-bbox="1131 1197 2116 1396"> <tr> <td data-bbox="1131 1197 1377 1244">Priority</td> <td data-bbox="1377 1197 1624 1244" style="background-color: #FFD700;">2</td> <td data-bbox="1624 1197 1859 1244">SWAP Reference</td> <td data-bbox="1859 1197 2116 1244"></td> </tr> <tr> <td data-bbox="1131 1244 1377 1348">Responsible Officer</td> <td colspan="3" data-bbox="1377 1244 2116 1348">Executive Director - Strategy, Workforce and Localities</td> </tr> <tr> <td data-bbox="1131 1348 1377 1396">Timescale</td> <td colspan="3" data-bbox="1377 1348 2116 1396">April 2024</td> </tr> </table>			Priority	2	SWAP Reference		Responsible Officer	Executive Director - Strategy, Workforce and Localities			Timescale	April 2024		
Priority	2	SWAP Reference													
Responsible Officer	Executive Director - Strategy, Workforce and Localities														
Timescale	April 2024														

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Overview of survey



Number of respondents

222

Number of questions

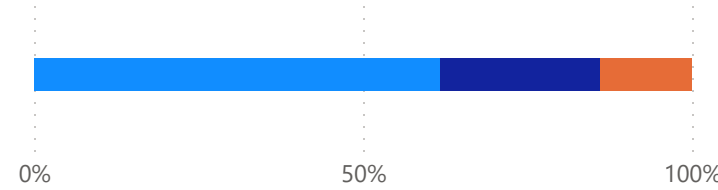
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New staff (12months)

20

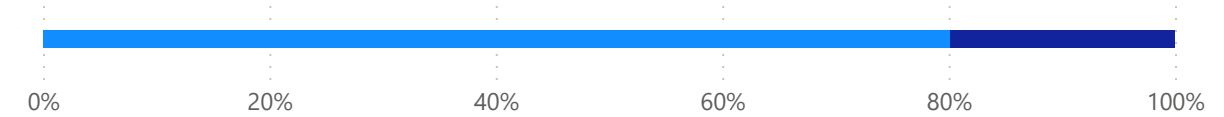
Are you a lone worker?

● No ● Sometimes ● Yes

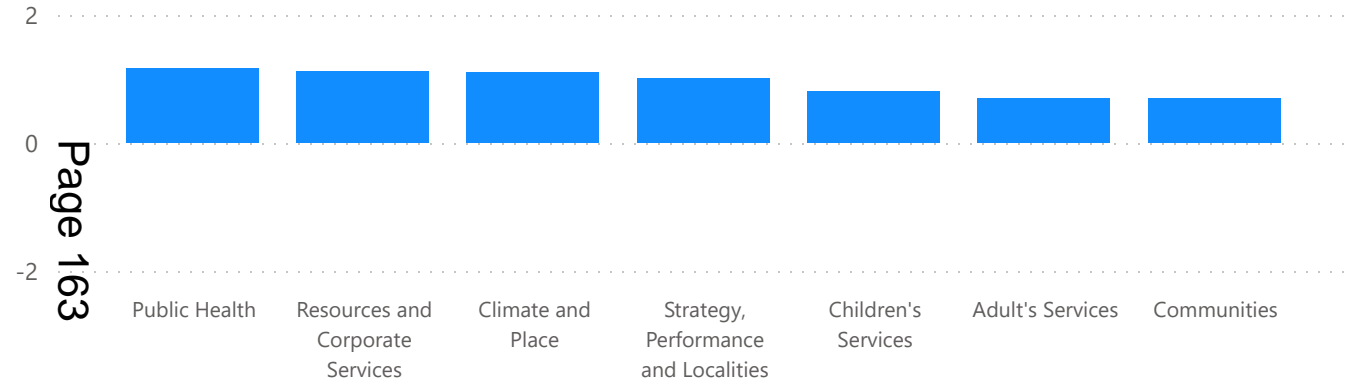


Do you work a non-standard working pattern? (E.g. shift working, weekends)

● No ● Yes



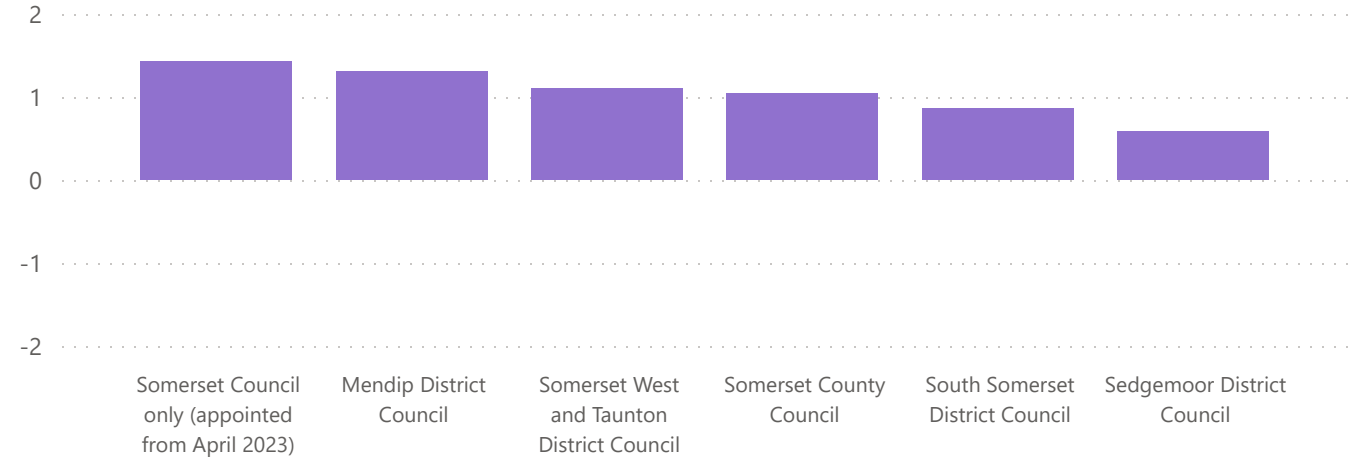
Average score by directorate



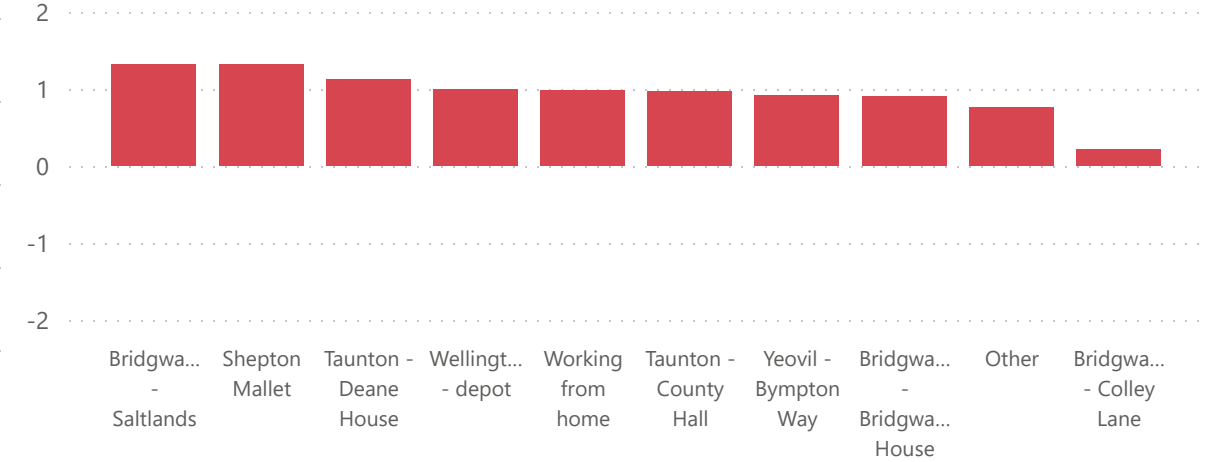
Average score by theme



Average score by legacy employer



Average score by office



Breakdown of responses

Number of respondents

222

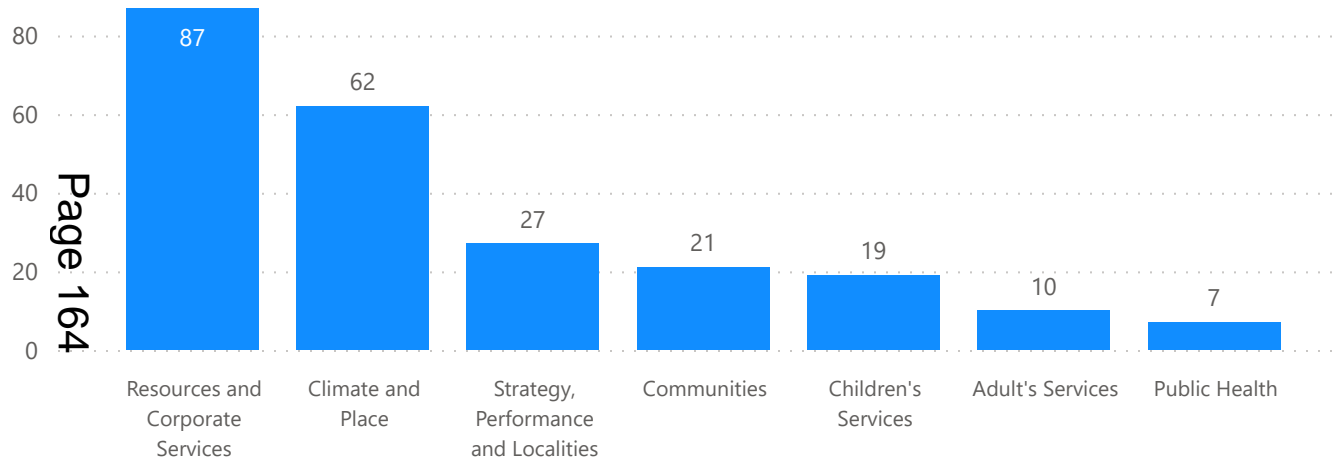
New staff (12months)

20

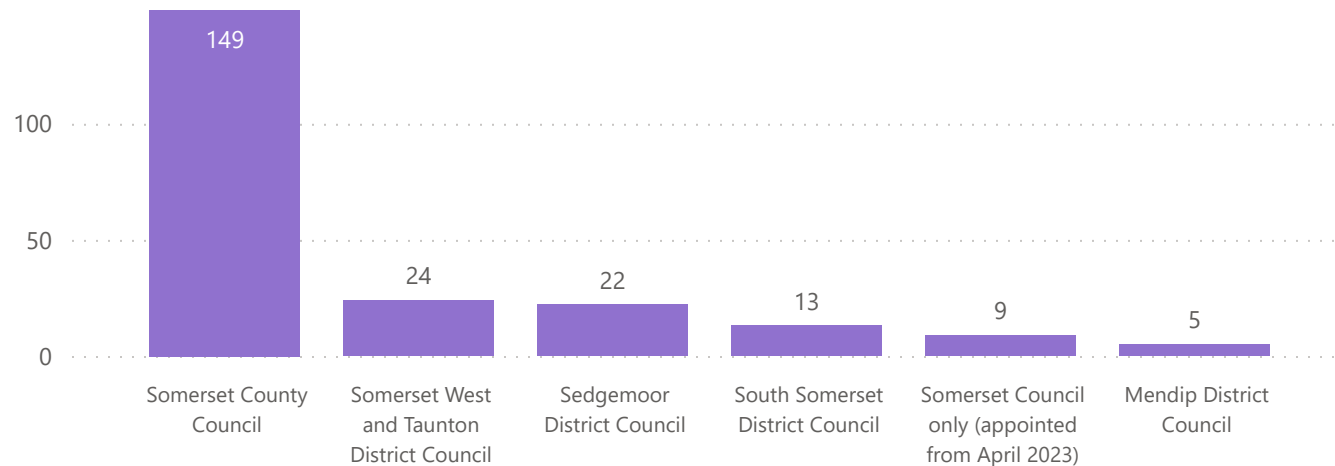
Number of questions

25

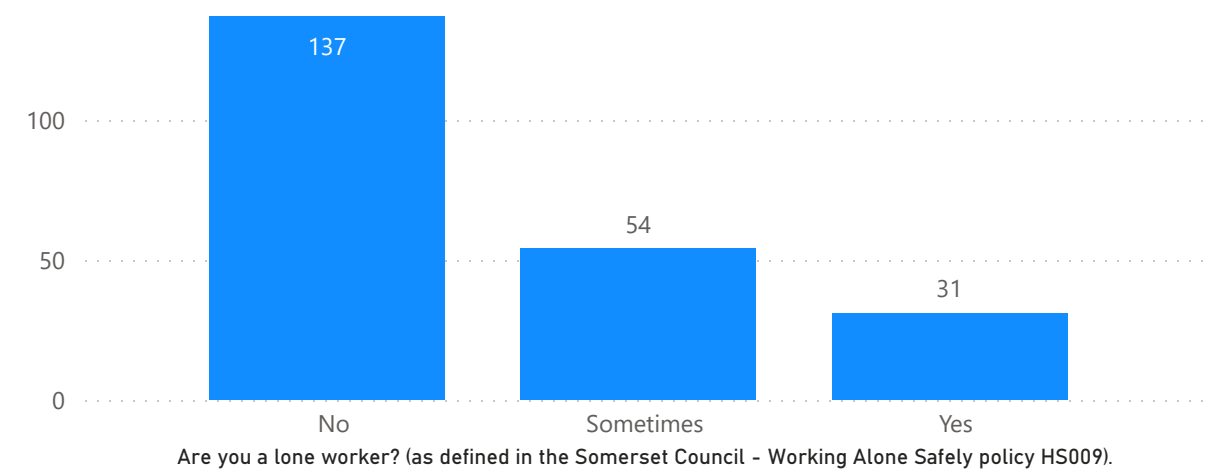
Number of responses by Directorate



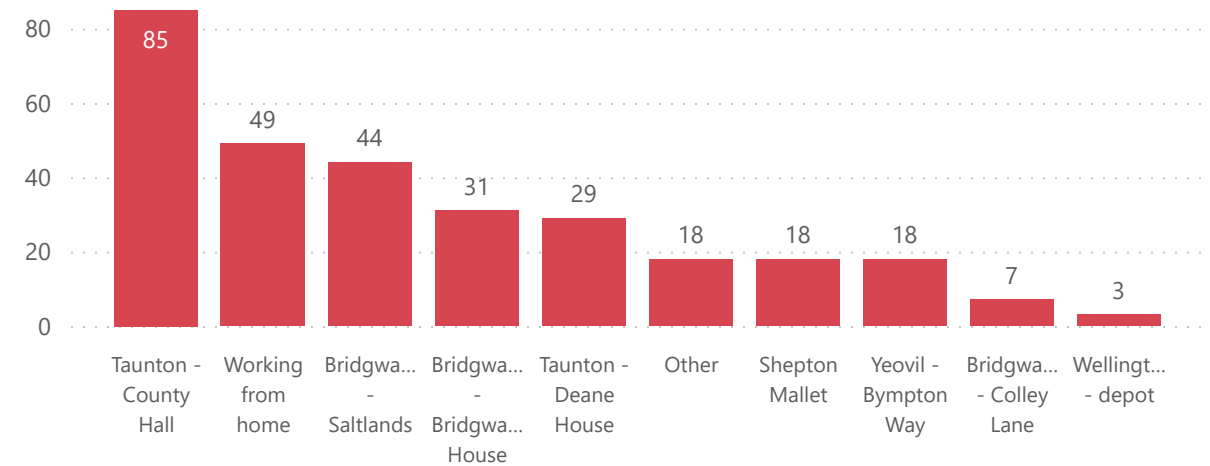
Responses by legacy employer



Are you a lone worker?



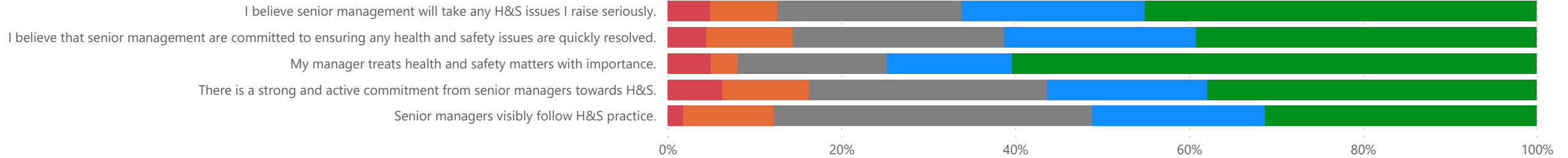
Number of responses by office



Results by theme 1

Management Commitment and Style

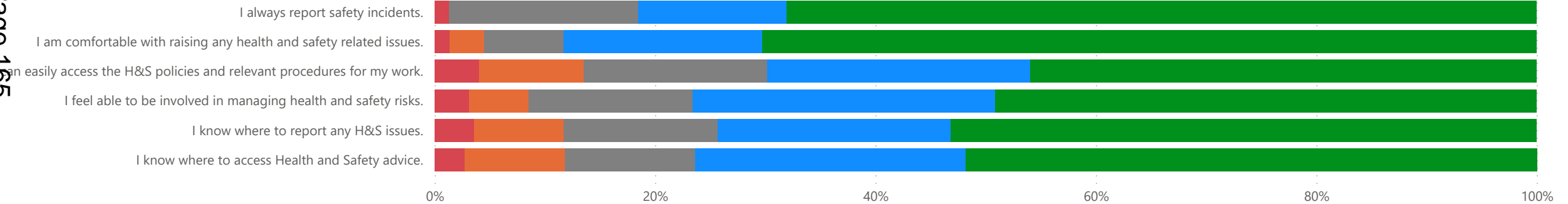
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Employee Involvement

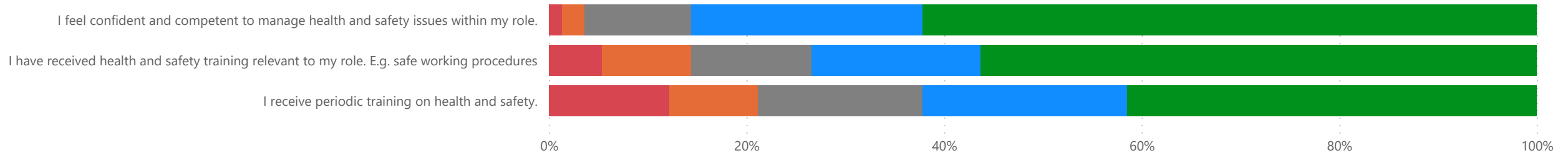
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree

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Training and competence

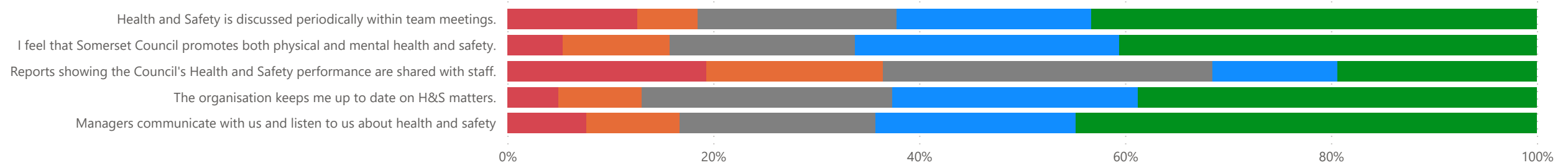
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Results by theme 2

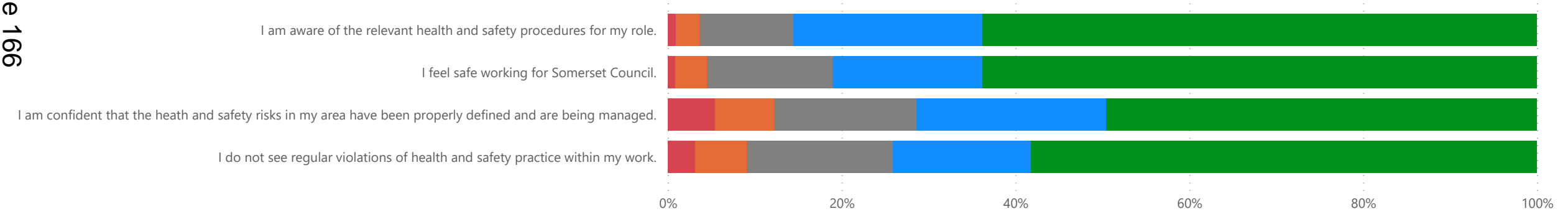
Communication

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



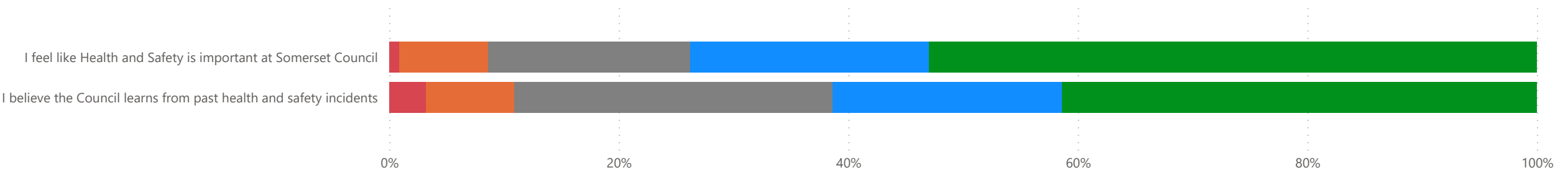
Compliance with procedures

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



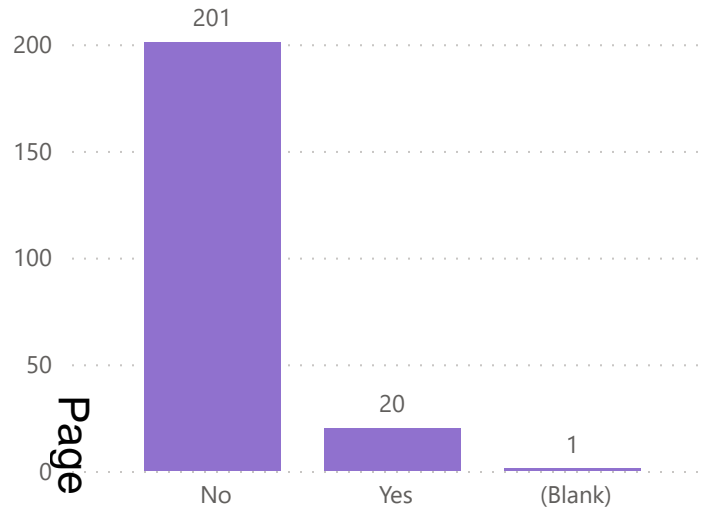
Organisational Learning

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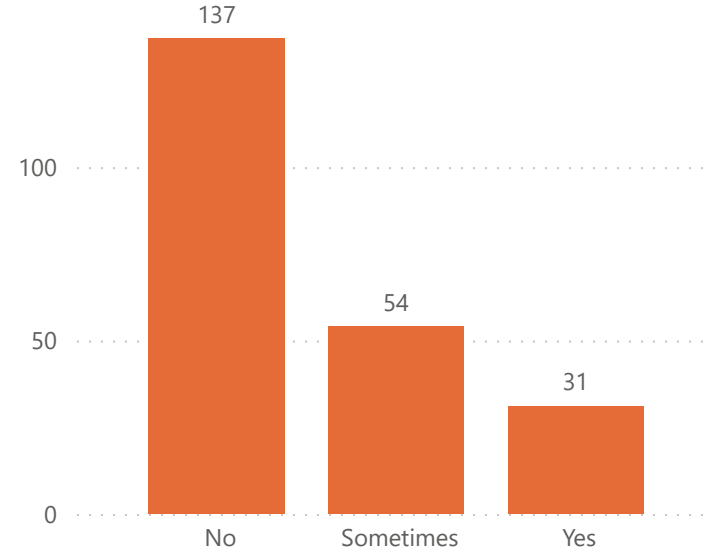


Overview of survey

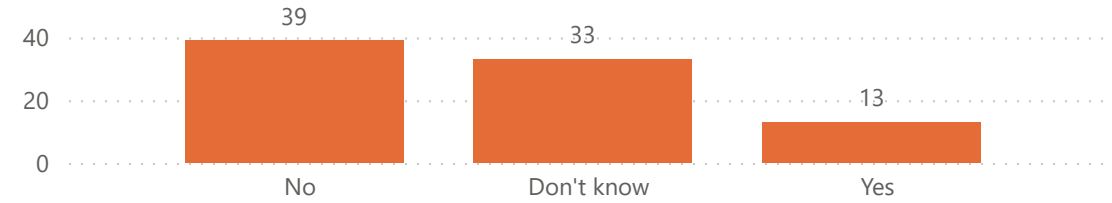
Have you joined the organisation within the last twelve months?



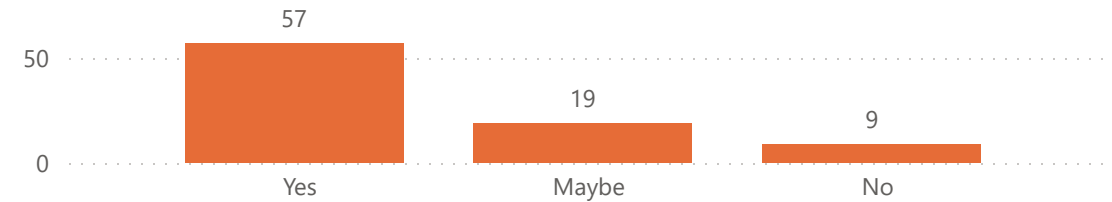
Are you a lone worker?



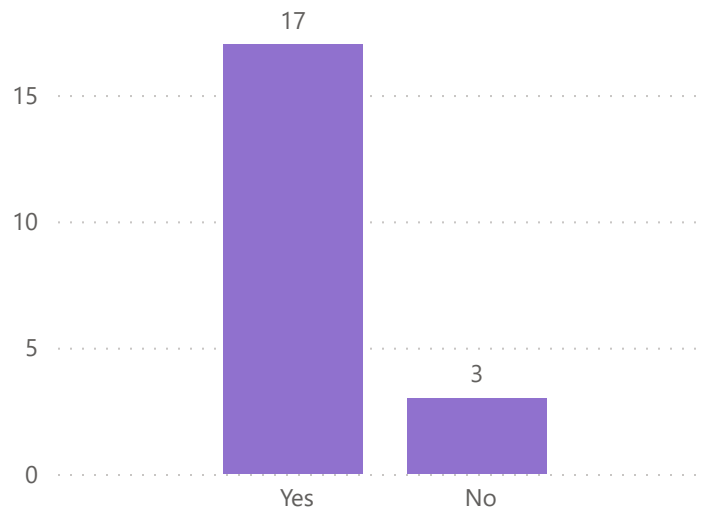
Are you working in a lone working environment that has been assessed as High/Medium Risk?



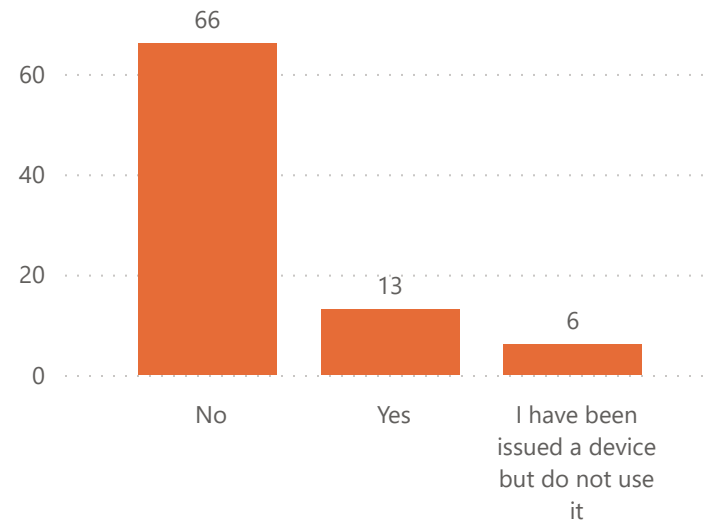
Do you receive adequate supervision, education and training to perform your role as a lone worker?



Did you receive health and safety training as part of your induction?



Have you been issued with a personal safety device?



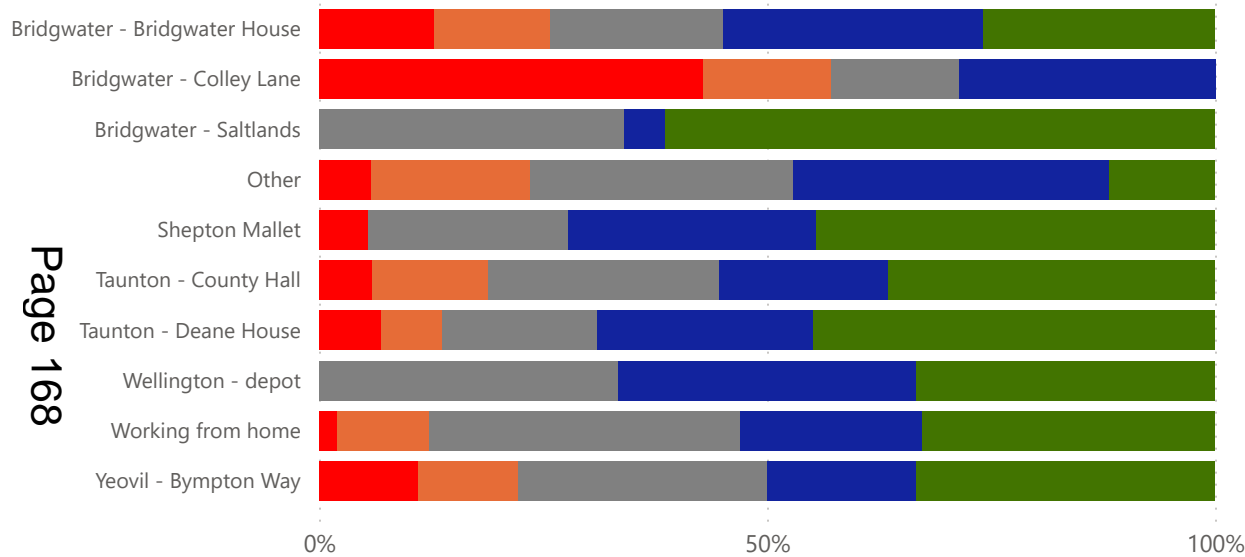
What are your reasons for not using your device?

- Batteries only last three hours from full charge and take 8 hours to charge.
- I have changed roles and no longer require one, I am answering as in my previous role as I only moved team 2 weeks ago
- if i can reach my lone worker device i can reach my phone and call 999 and get the right help quicker
- it does not work
- Lack of accountability of managers using devices to track location. I have been sent screenshot in real time of managers tracking me and abusing the system. If there safeguards in place for staff slto see who is accessing my data then I would use it
- never been shown how to use it.

There is a strong and active commitment from senior managers towards H&S.

Responses by office location

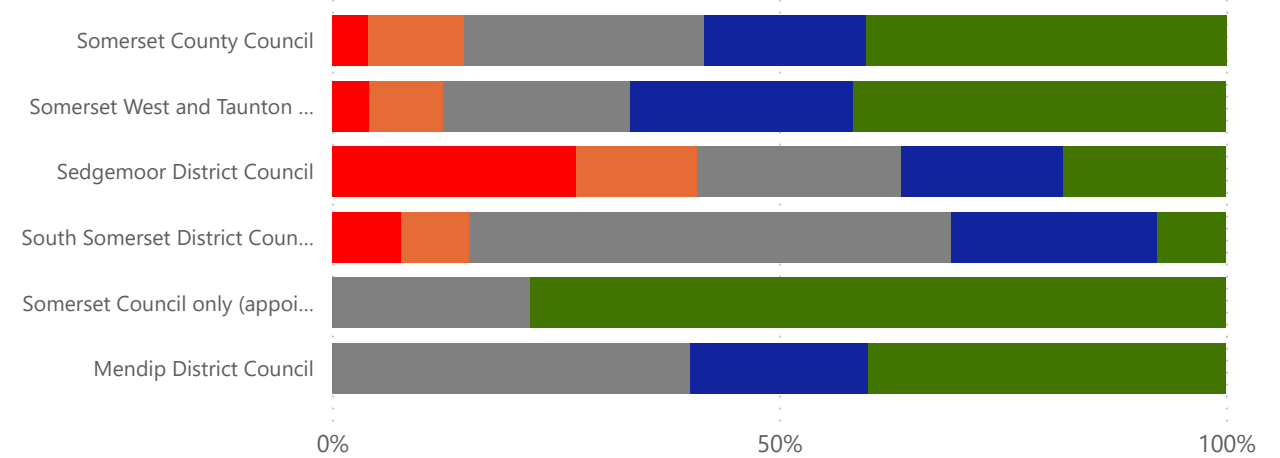
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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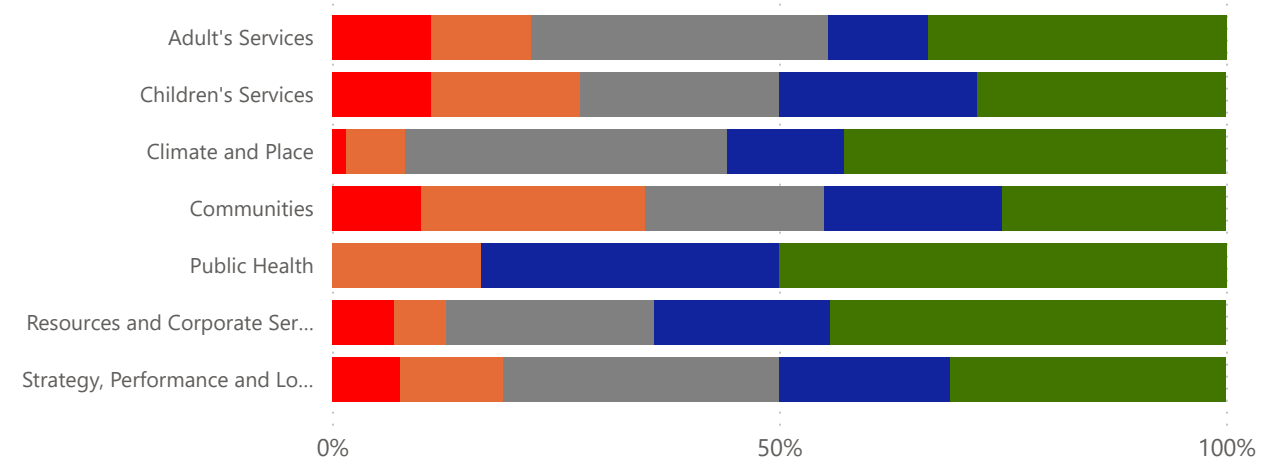
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



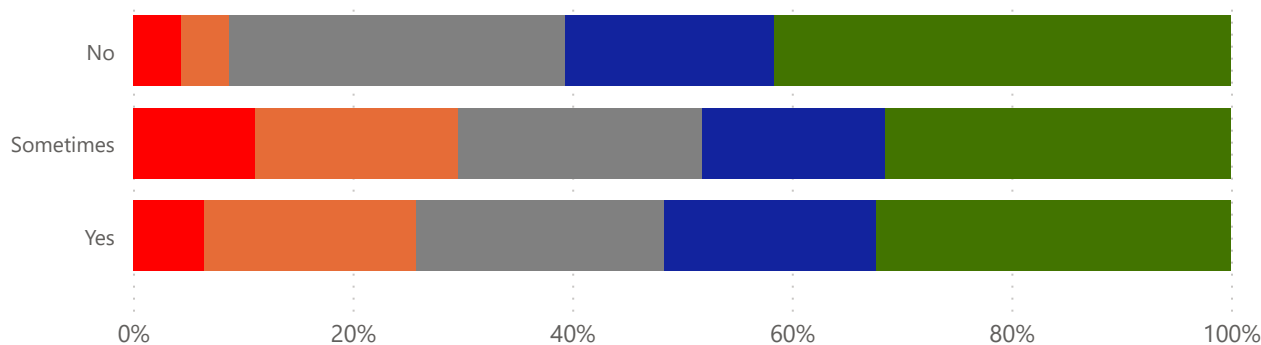
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

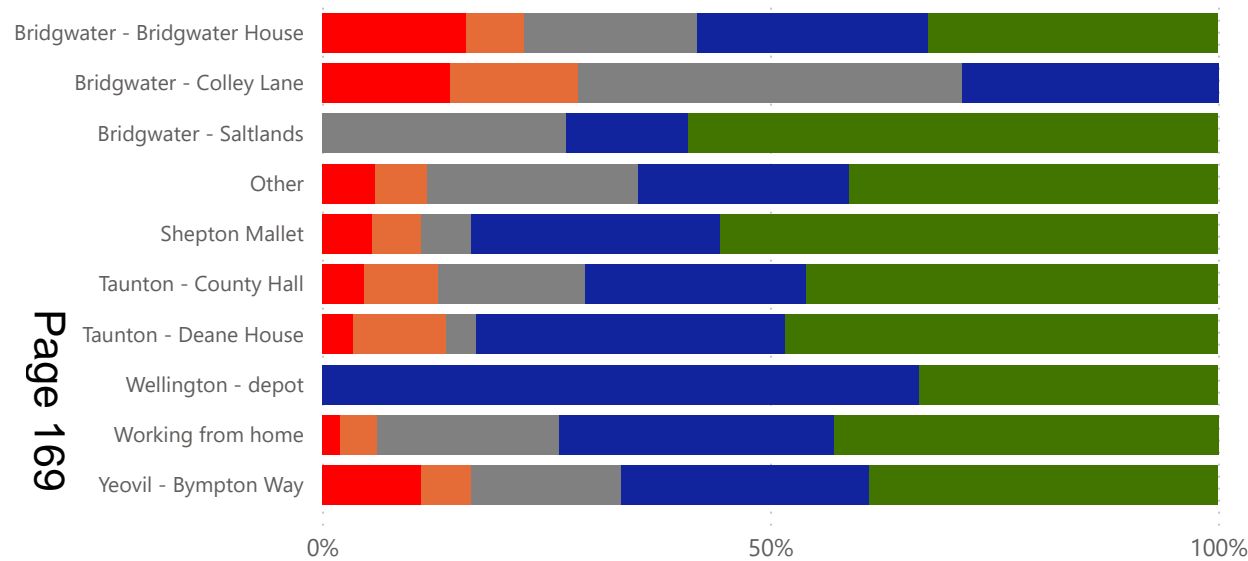
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I believe senior management will take any H&S issues I raise seriously.

Responses by office location

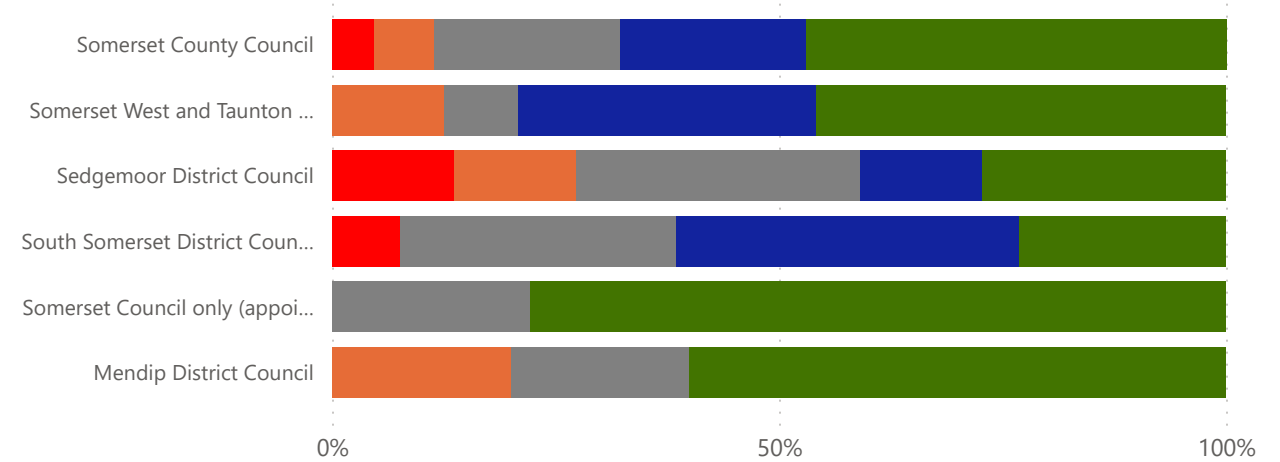
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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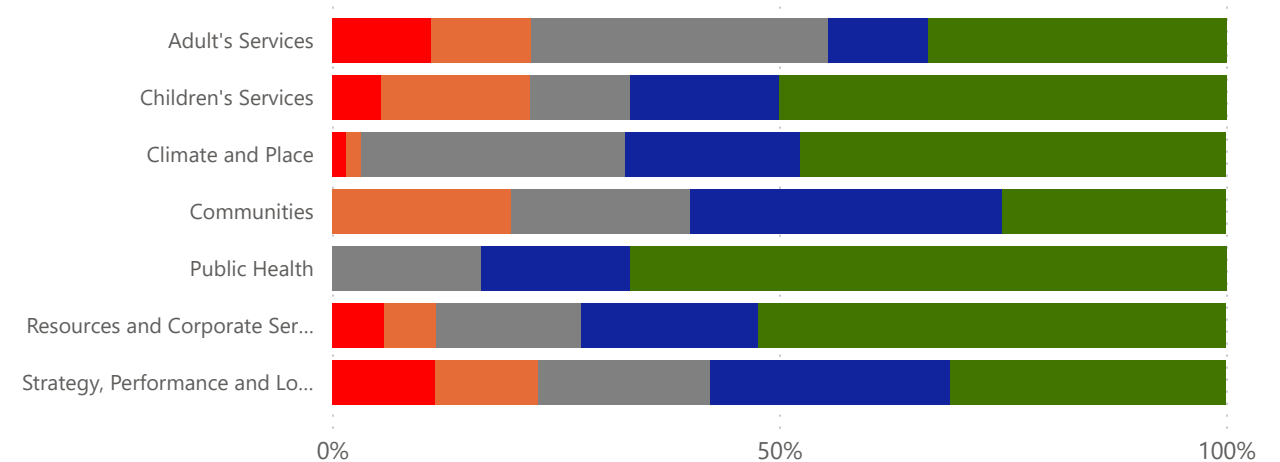
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



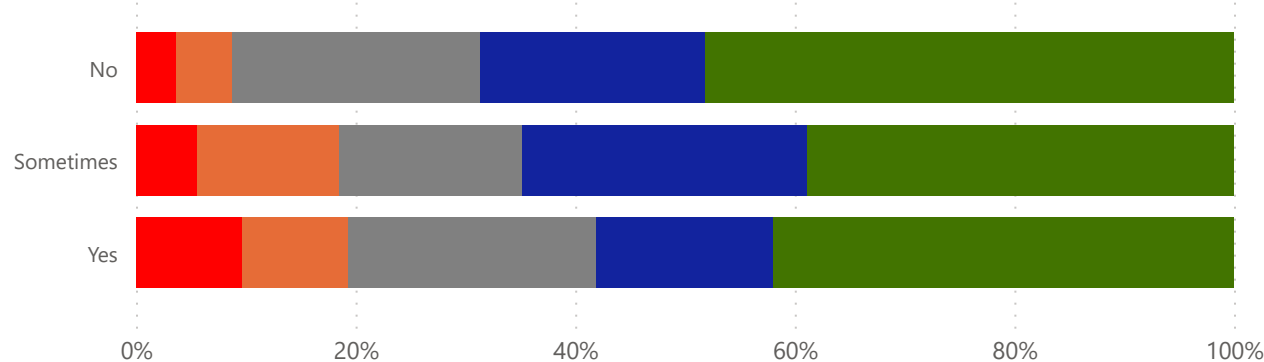
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

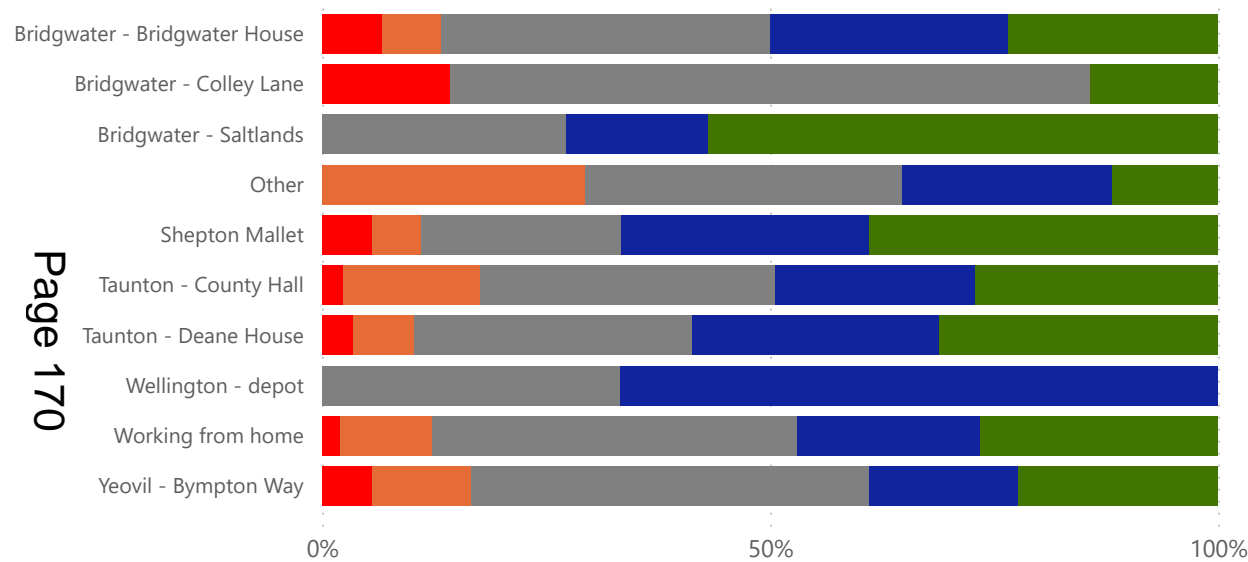
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Senior managers visibly follow H&S practice.

Responses by office location

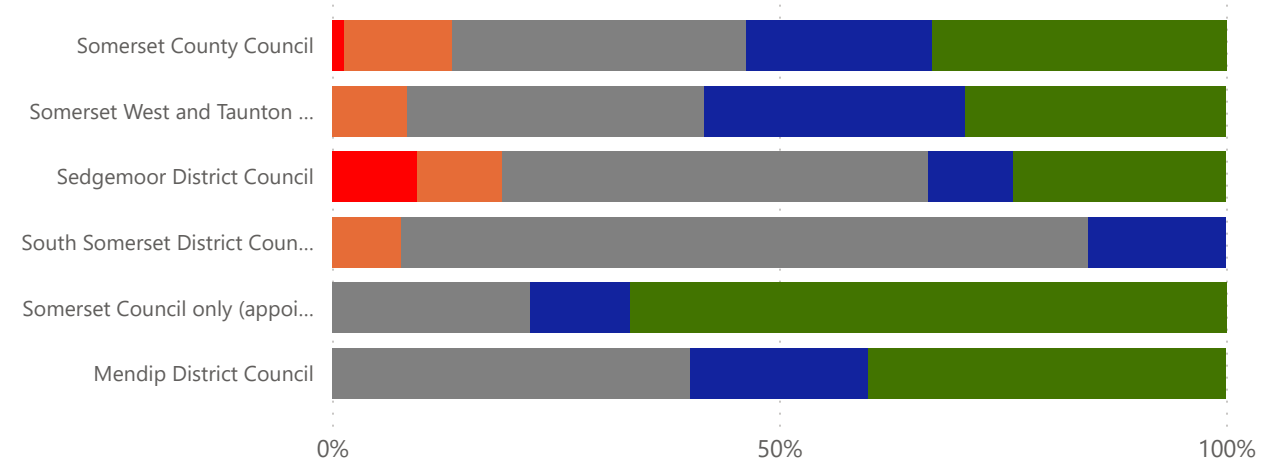
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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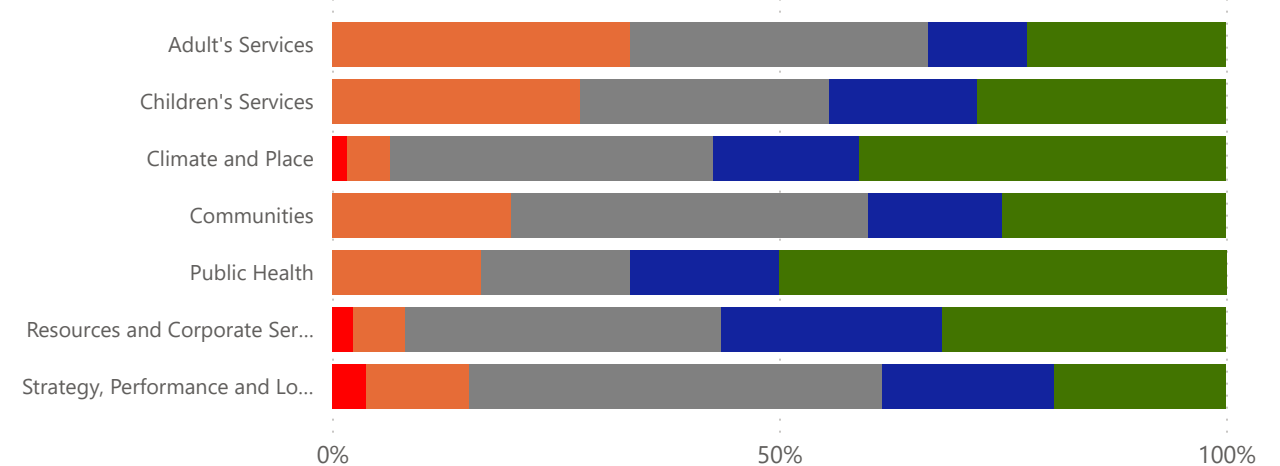
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



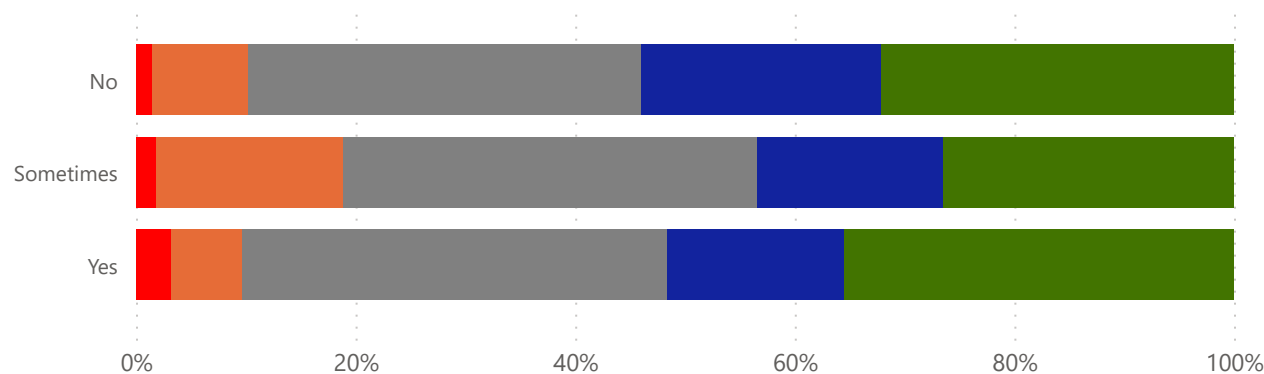
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

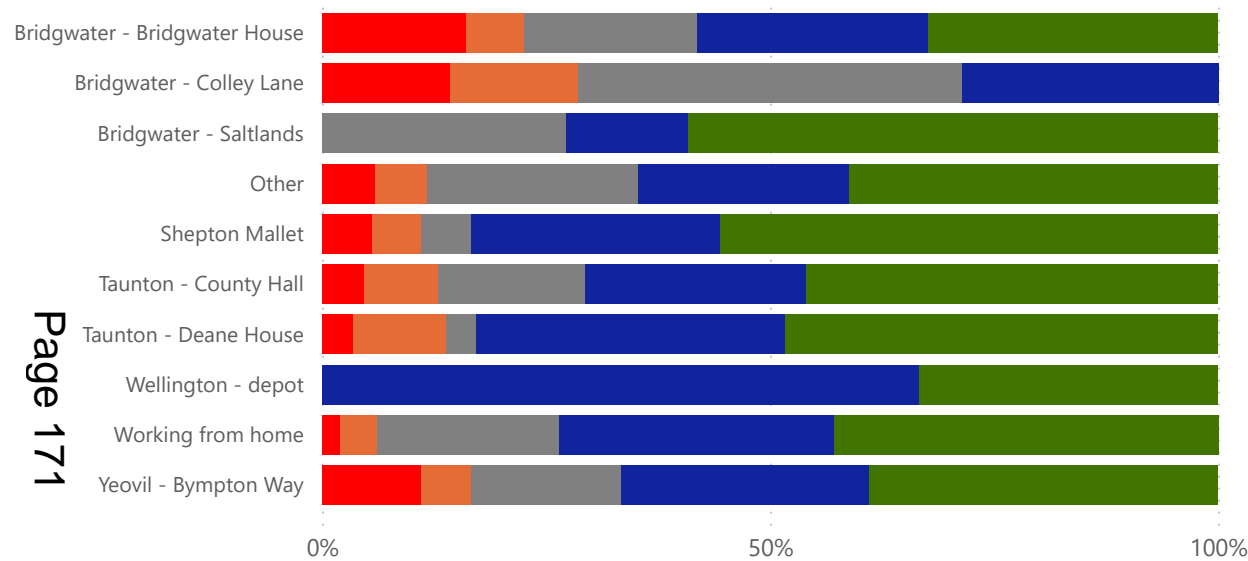
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I believe senior management will take any H&S issues I raise seriously.

Responses by office location

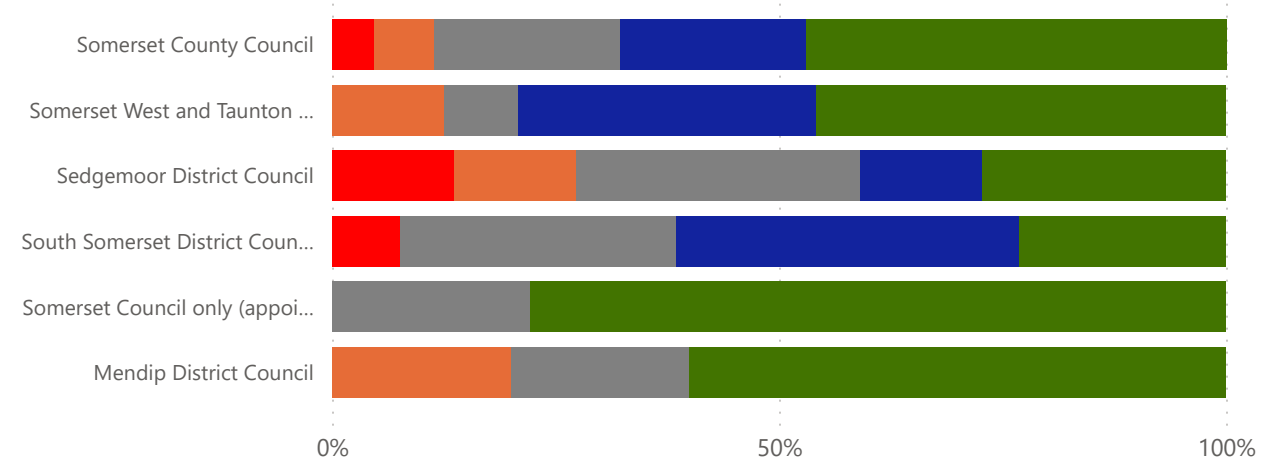
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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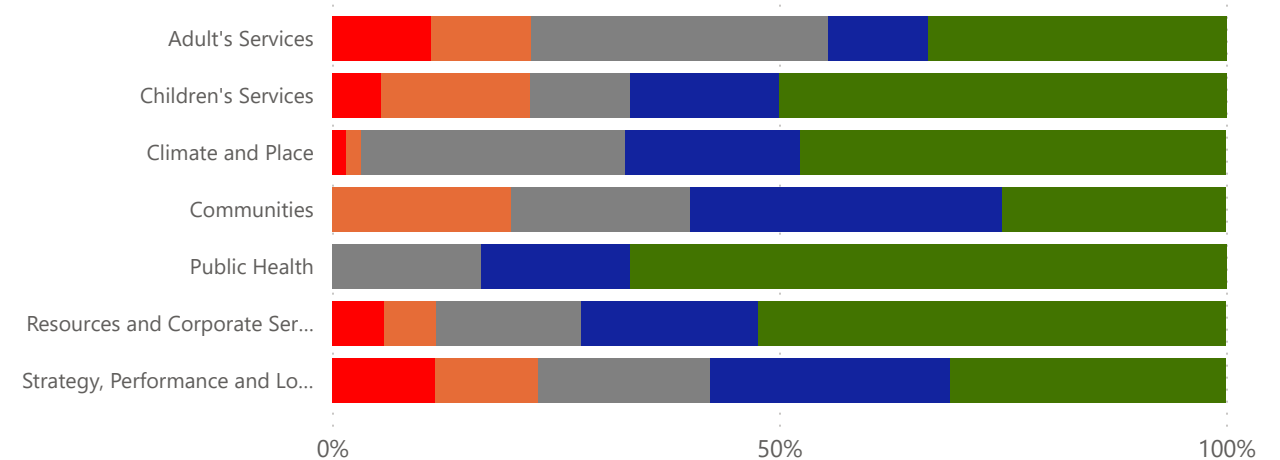
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



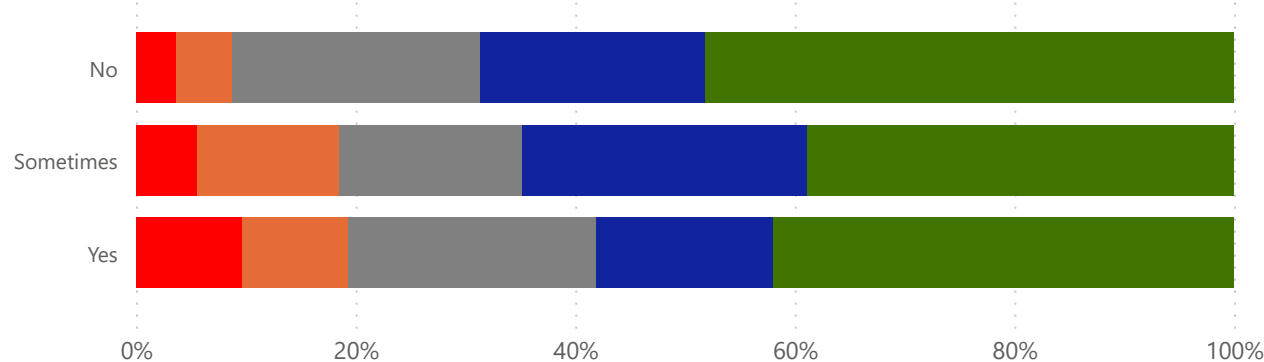
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

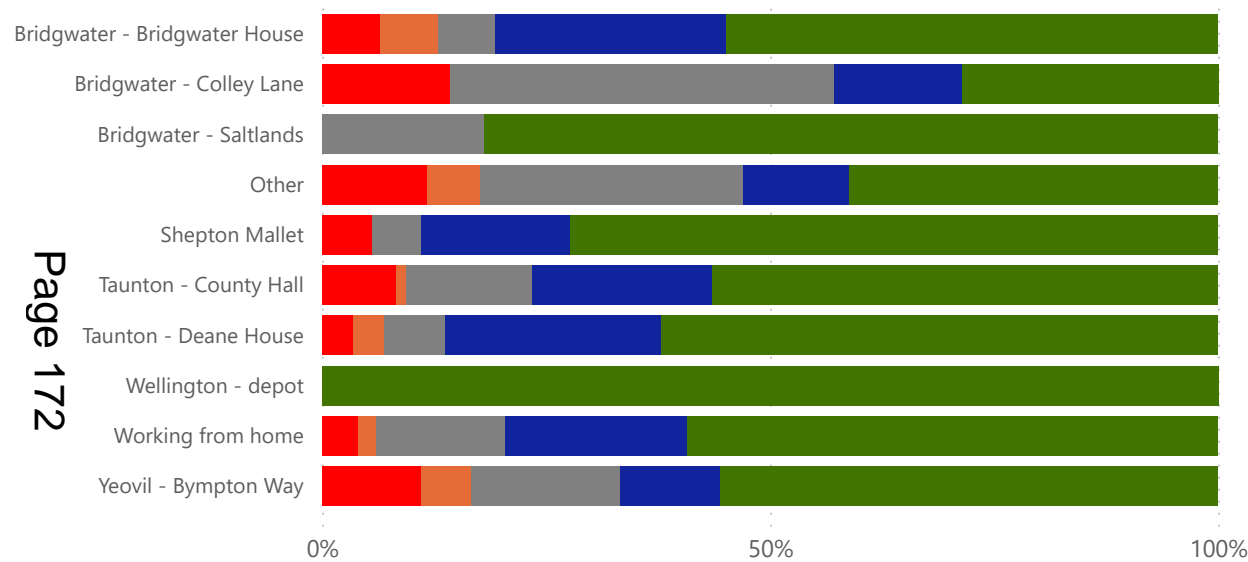
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



My manager treats health and safety matters with importance.

Responses by office location

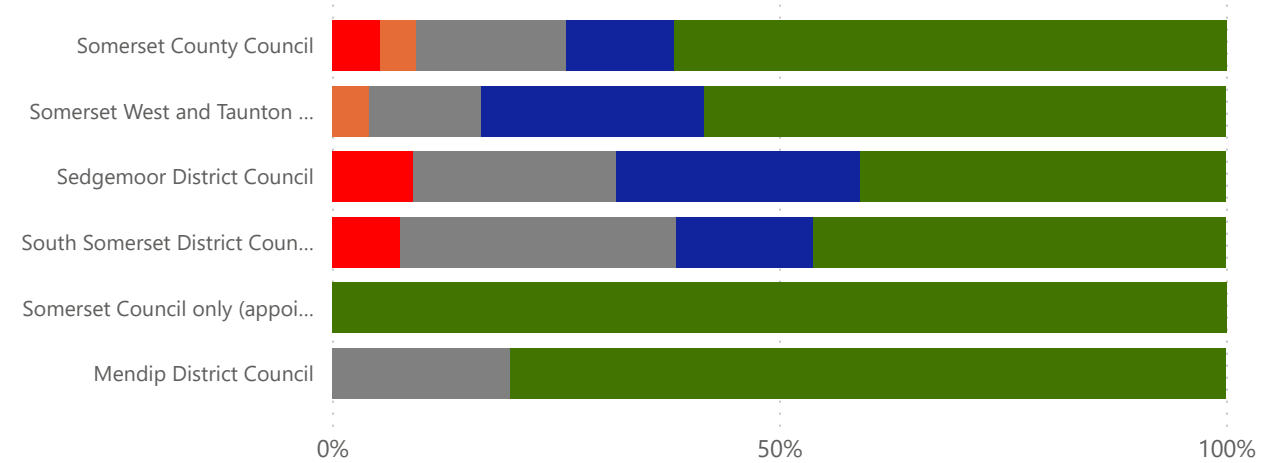
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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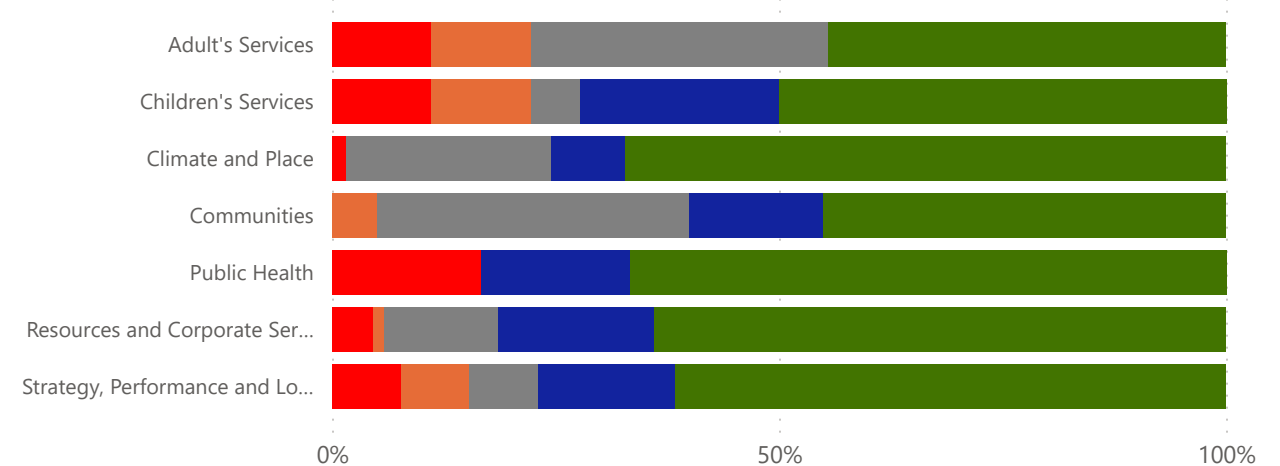
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



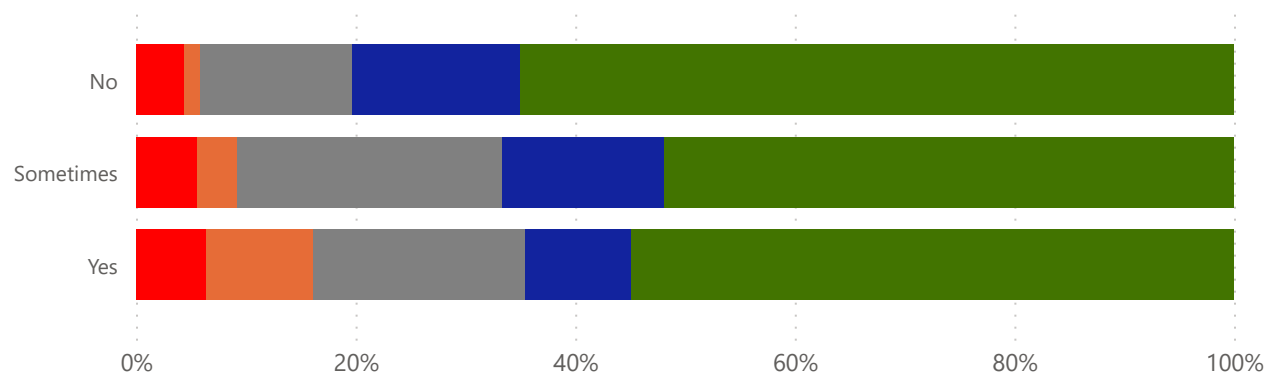
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

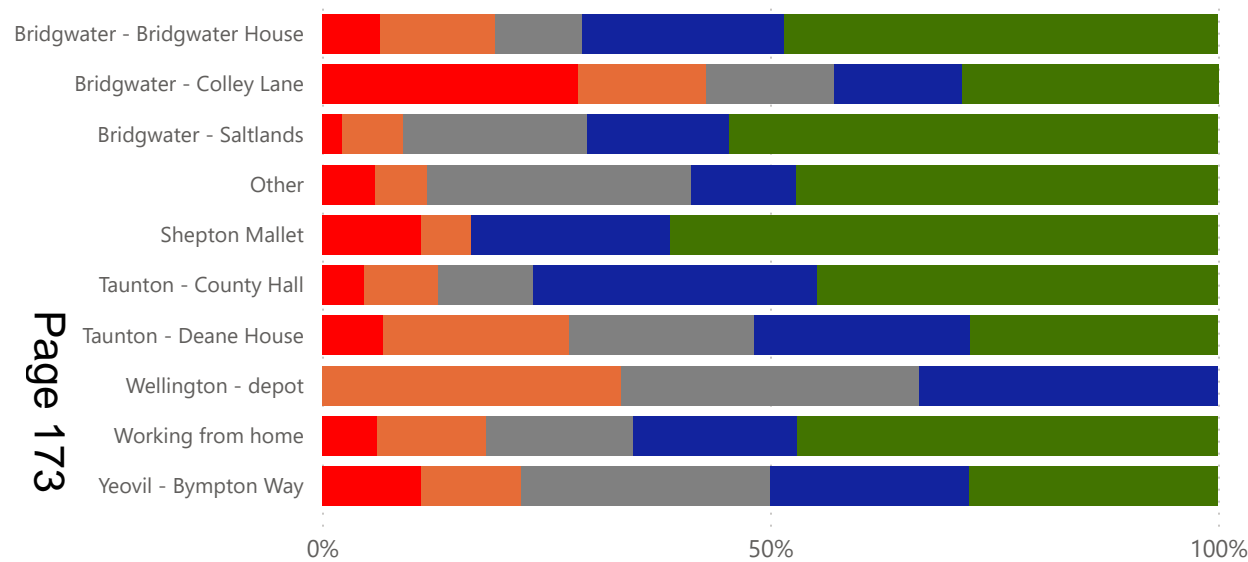
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I can easily access the H&S policies and relevant procedures for my work.

Responses by office location

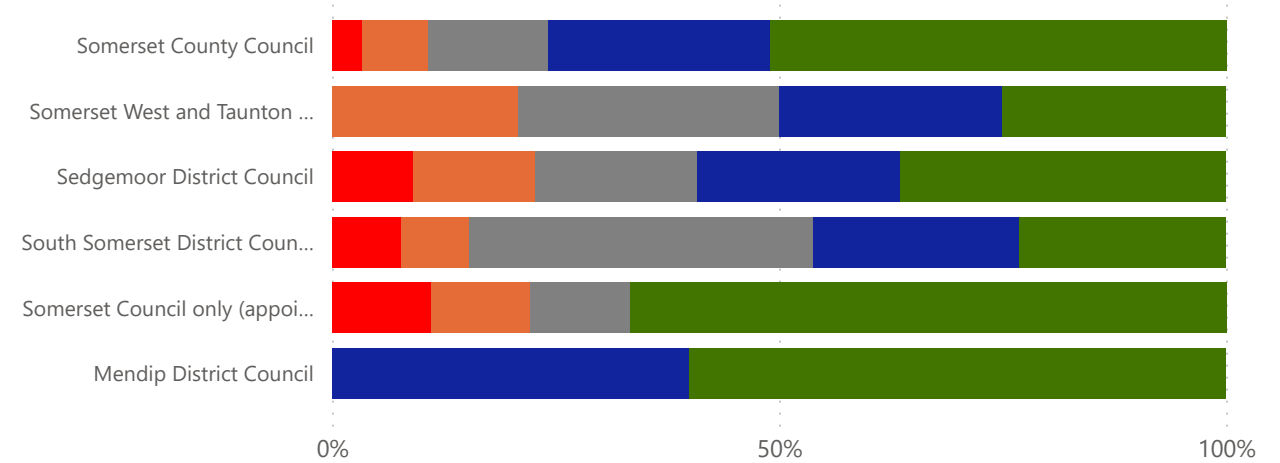
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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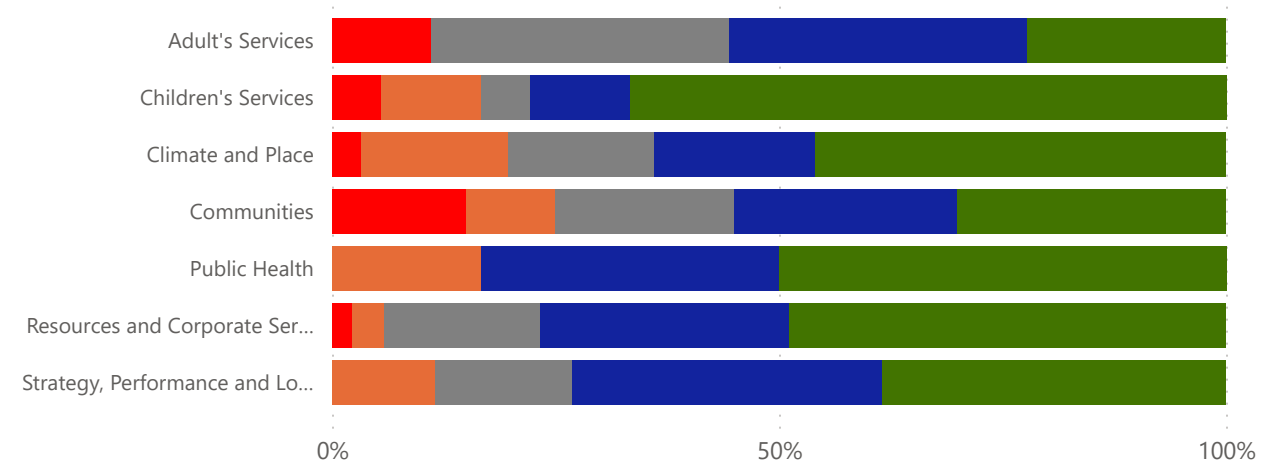
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



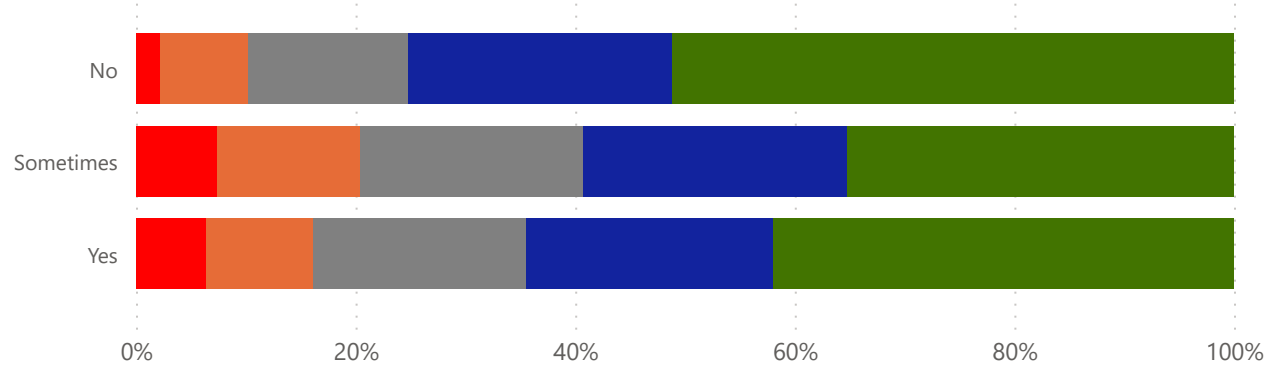
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

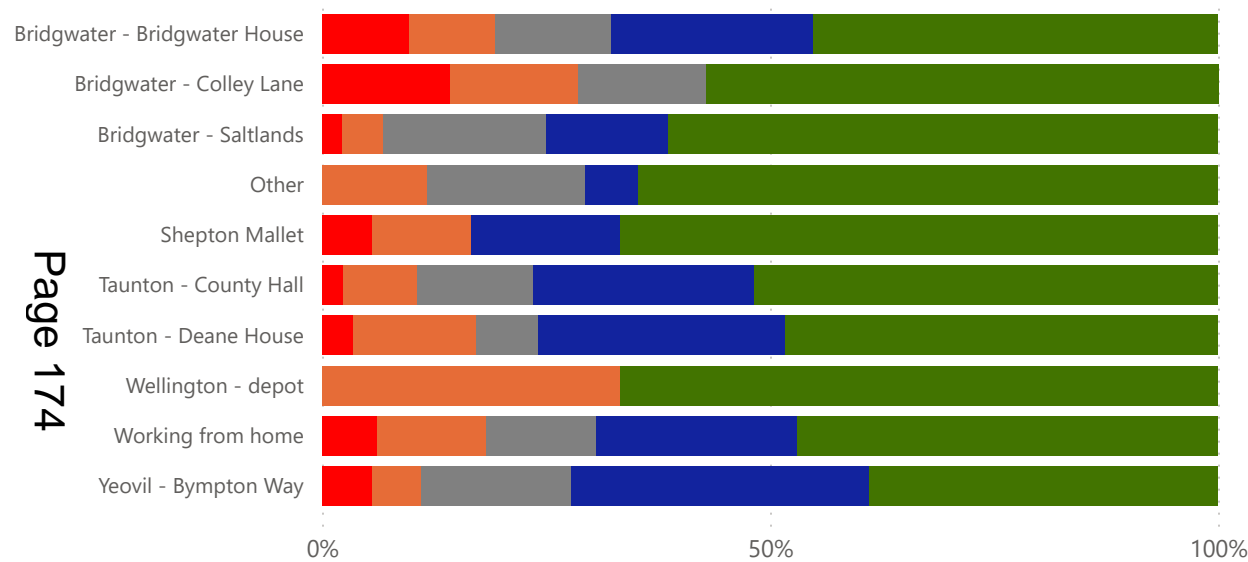
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I know where to report any H&S issues.

Responses by office location

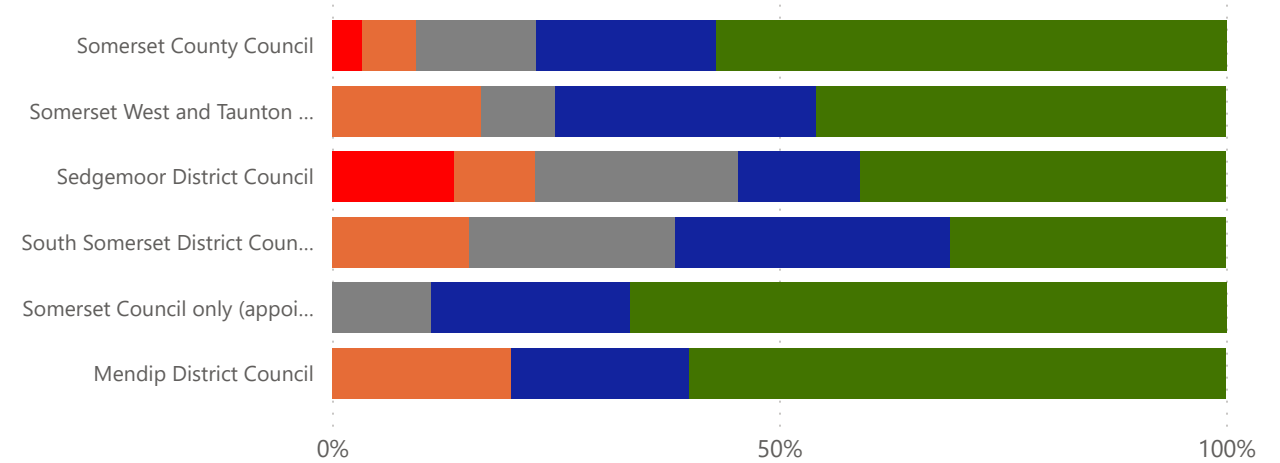
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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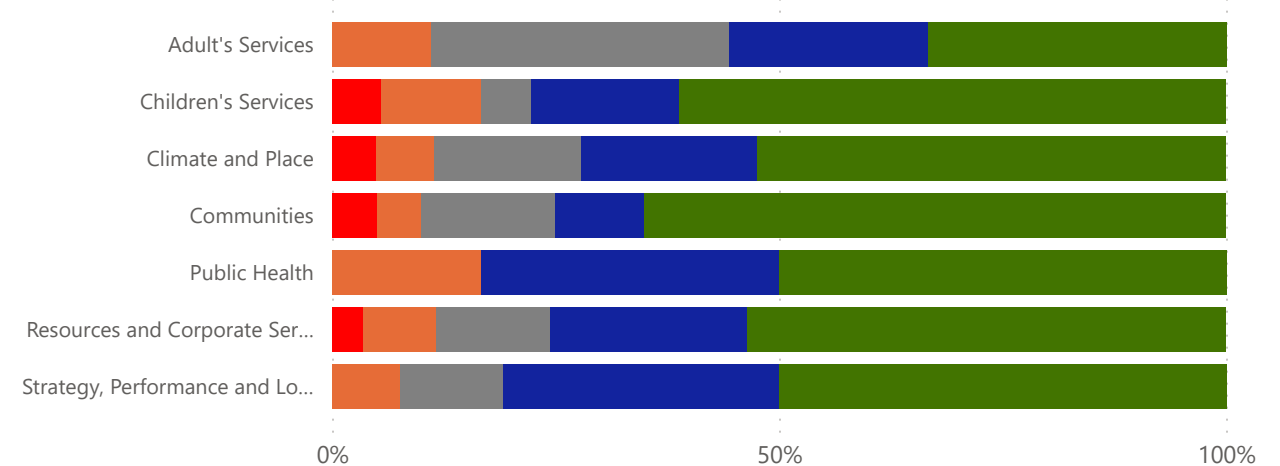
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



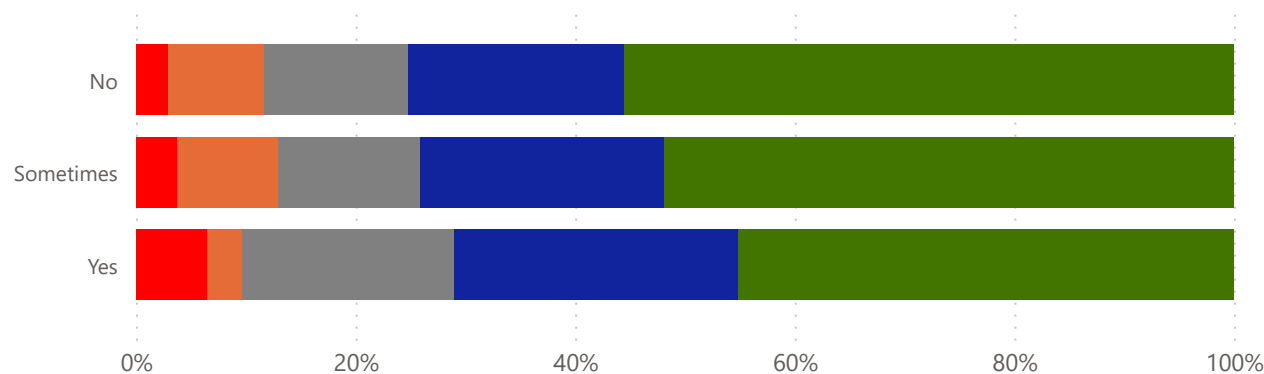
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

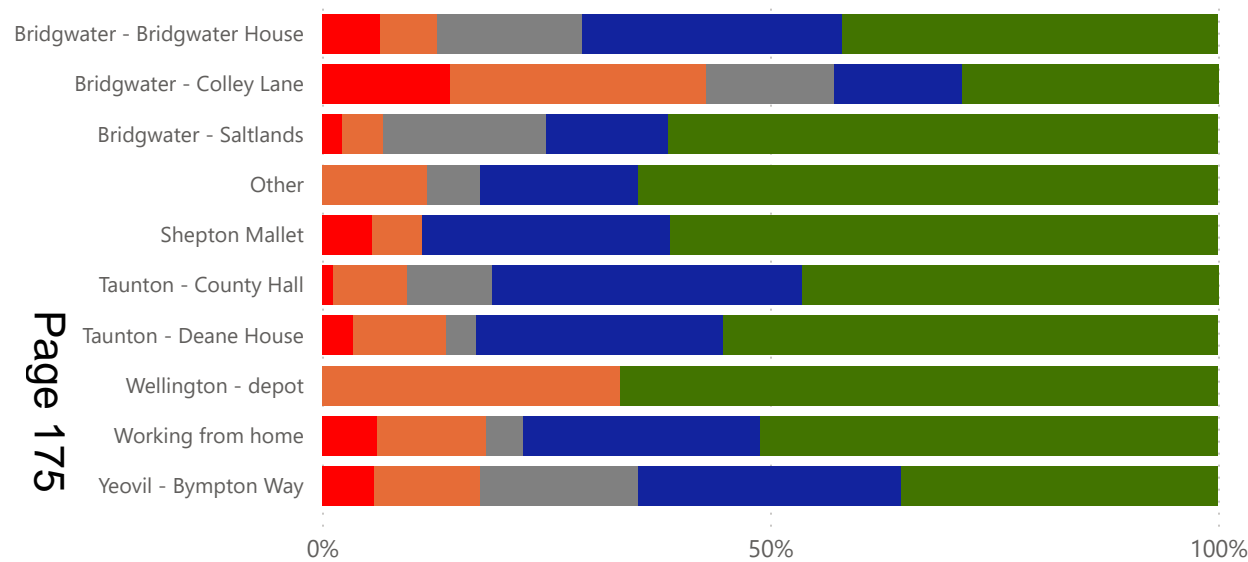
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I know where to access Health and Safety advice.

Responses by office location

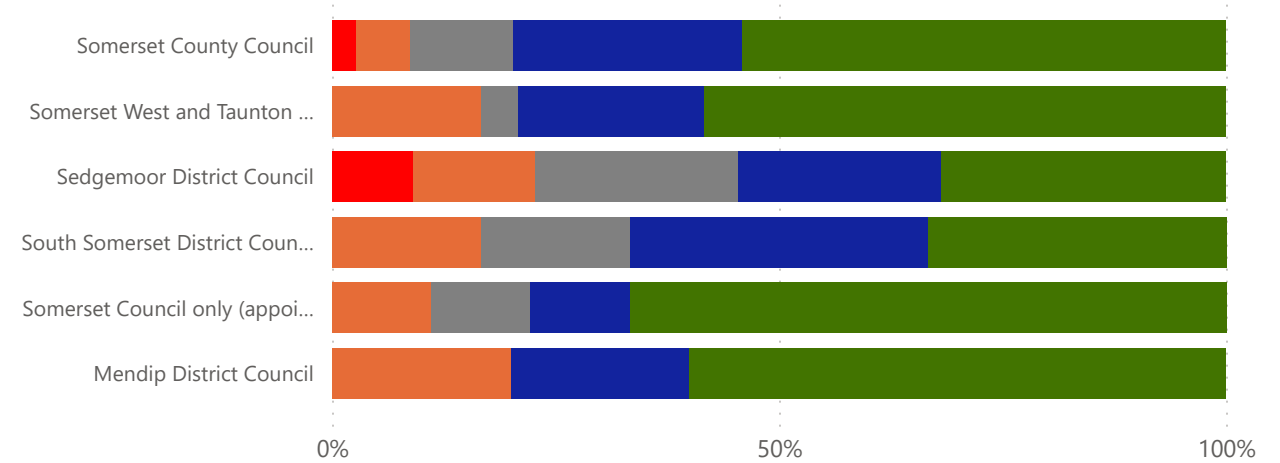
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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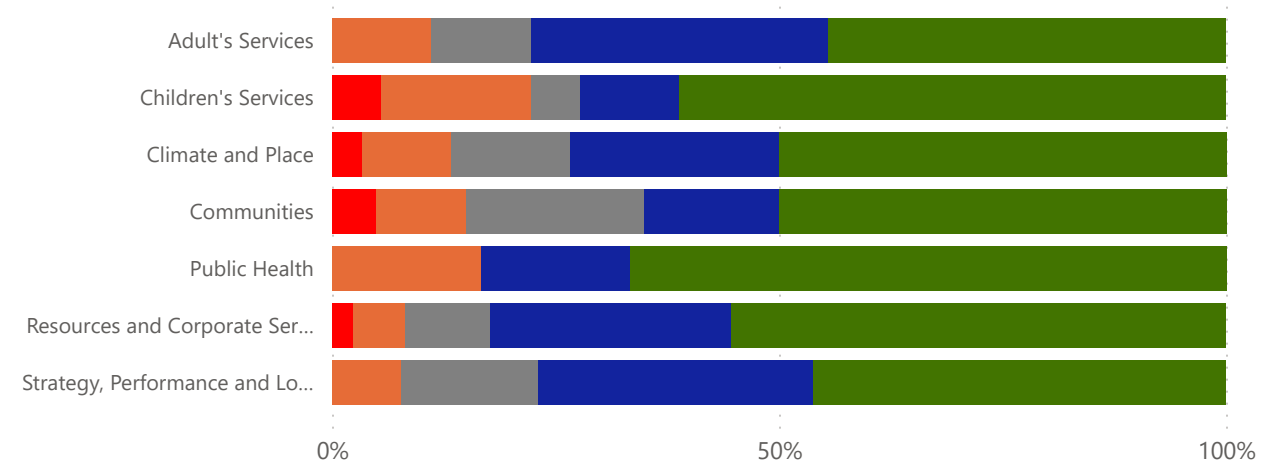
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



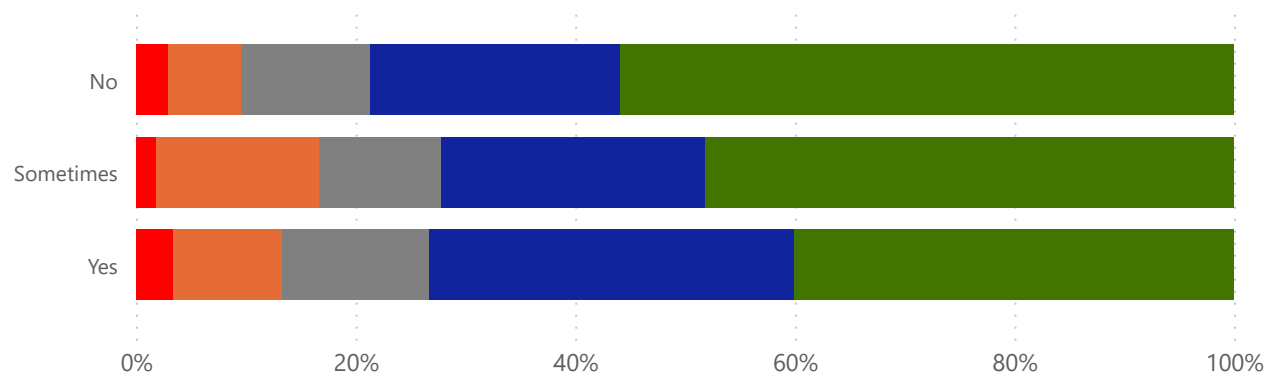
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

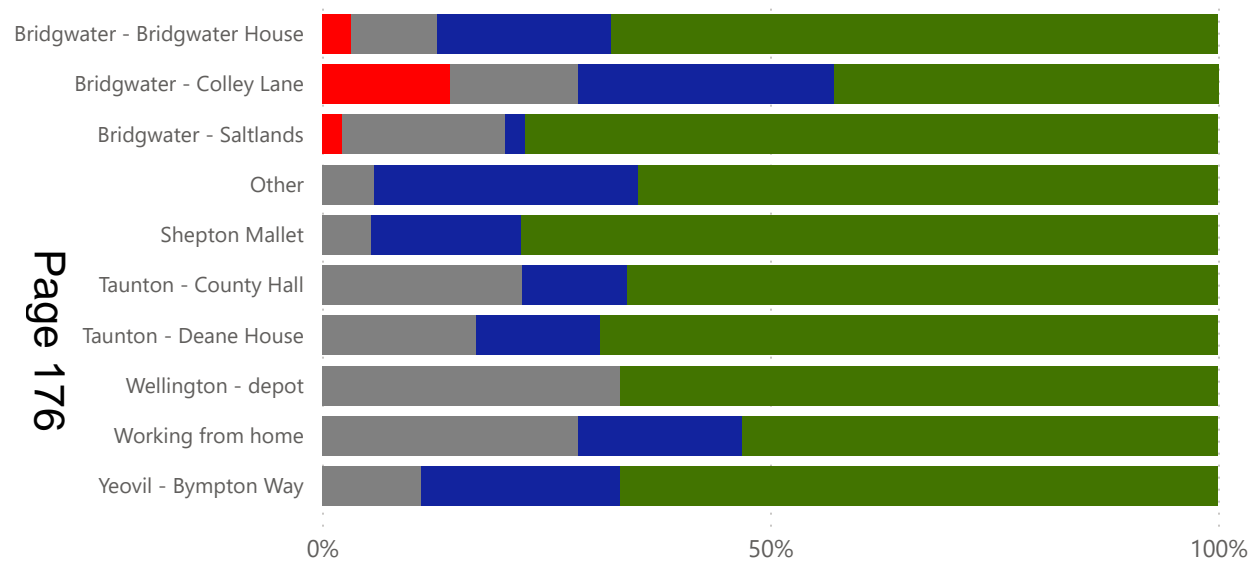
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I always report safety incidents.

Responses by office location

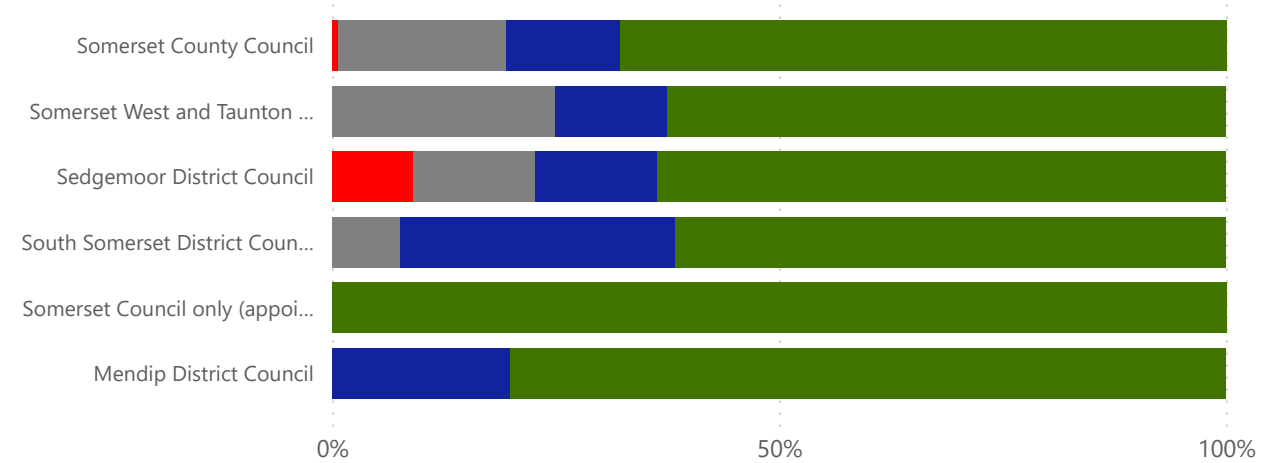
● 1. Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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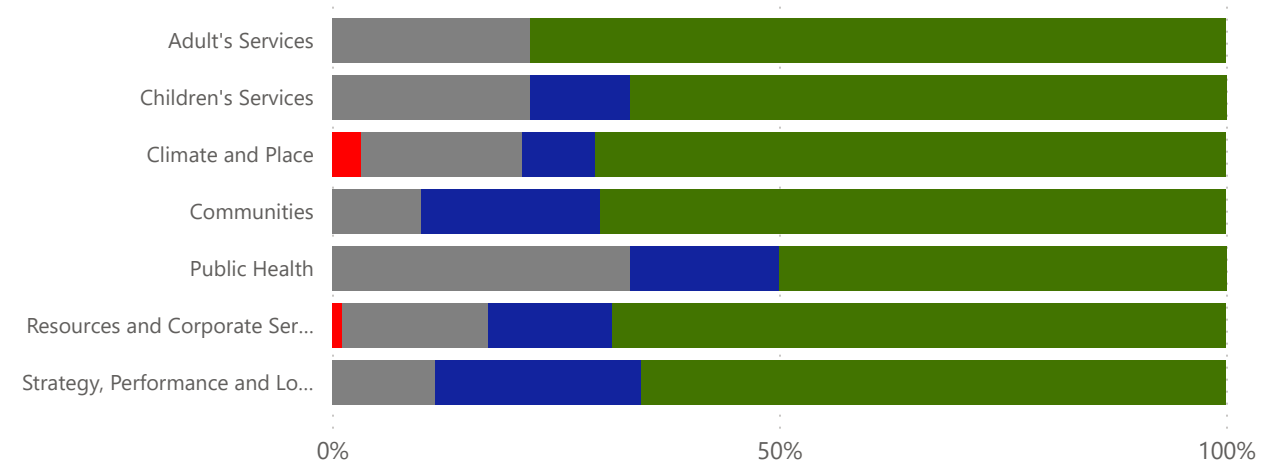
Responses by legacy organisation

● 1. Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



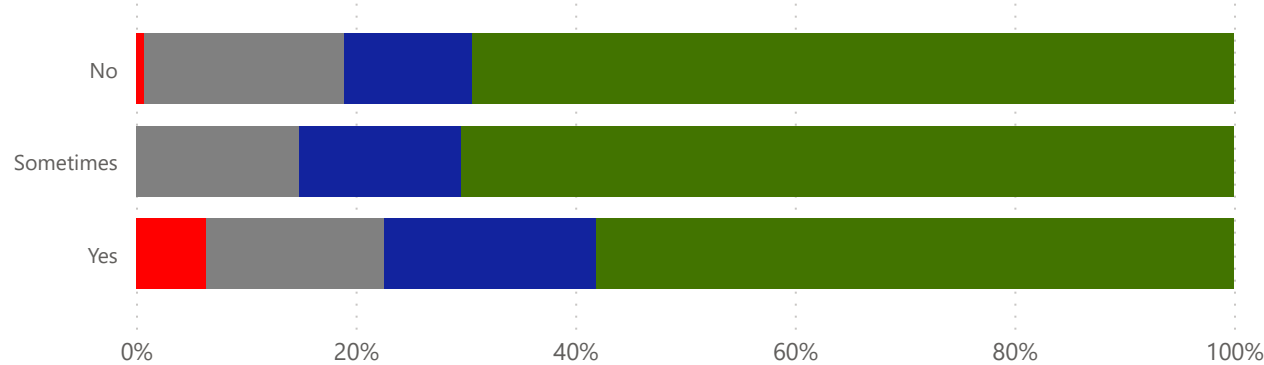
Responses by directorate

● 1. Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

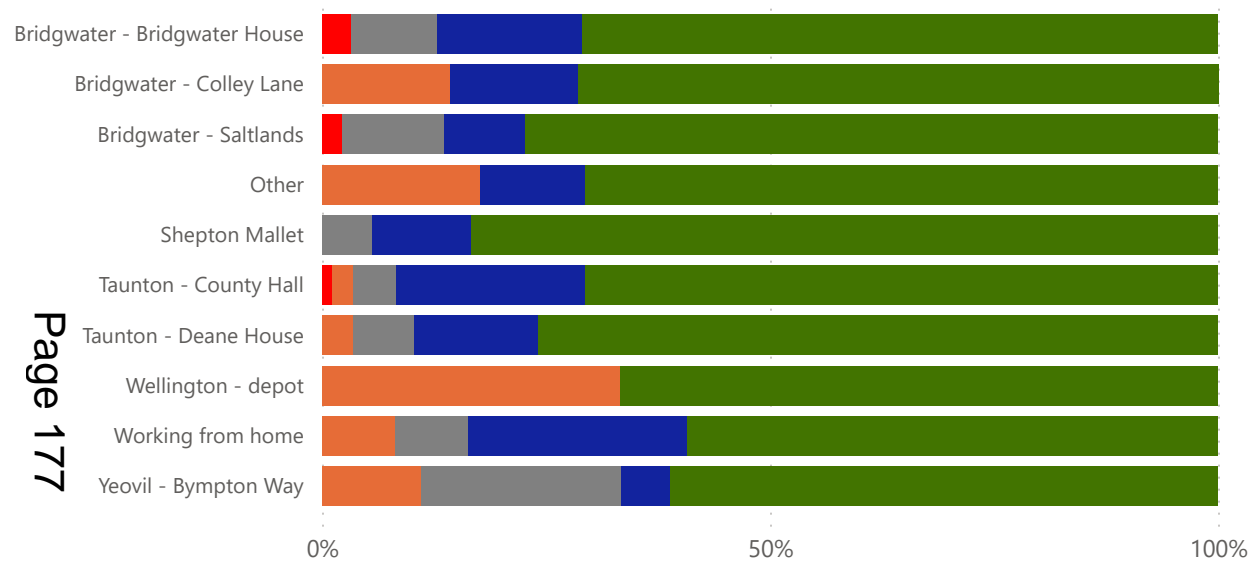
● 1. Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I am comfortable with raising any health and safety related issues.

Responses by office location

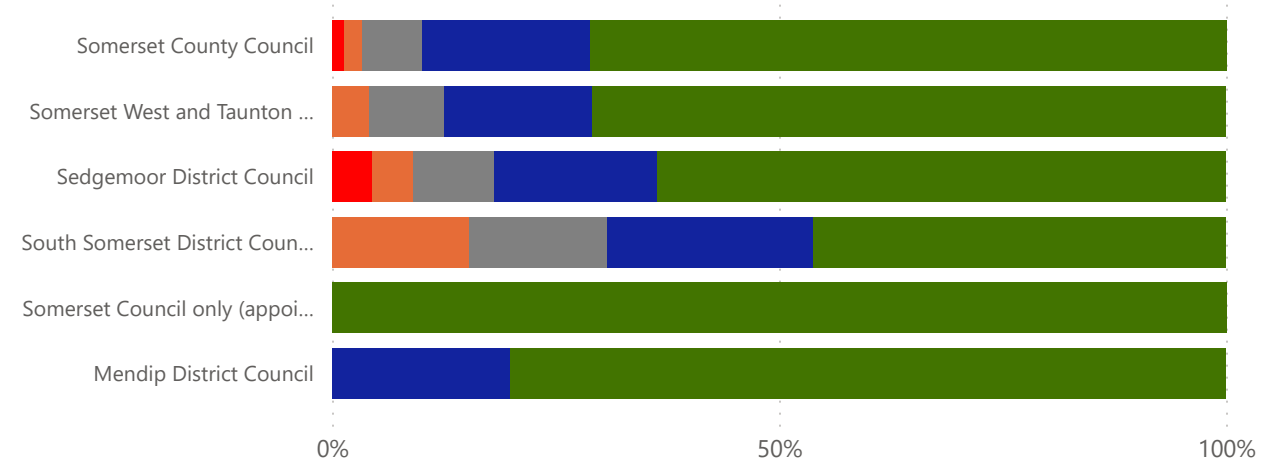
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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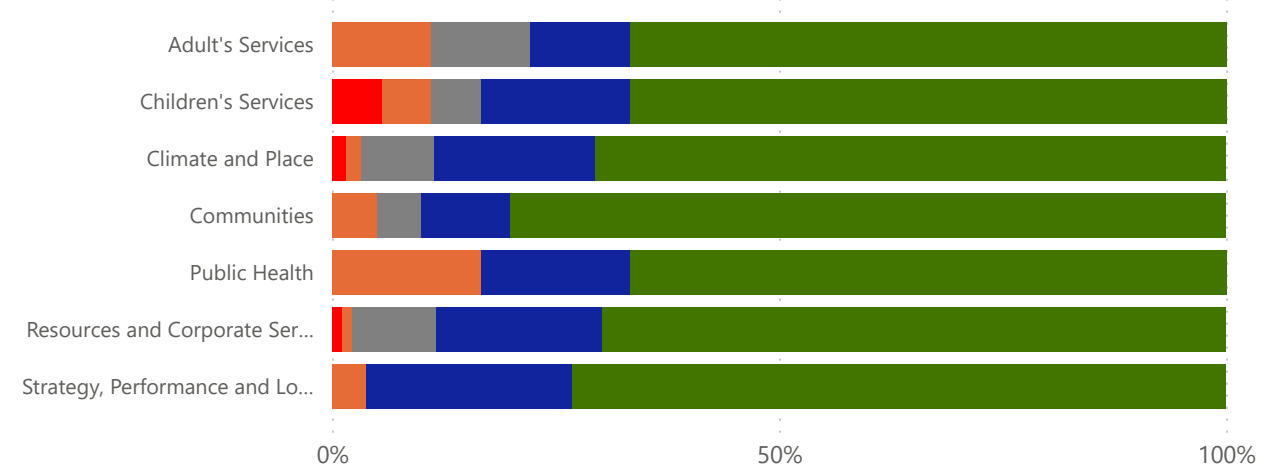
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



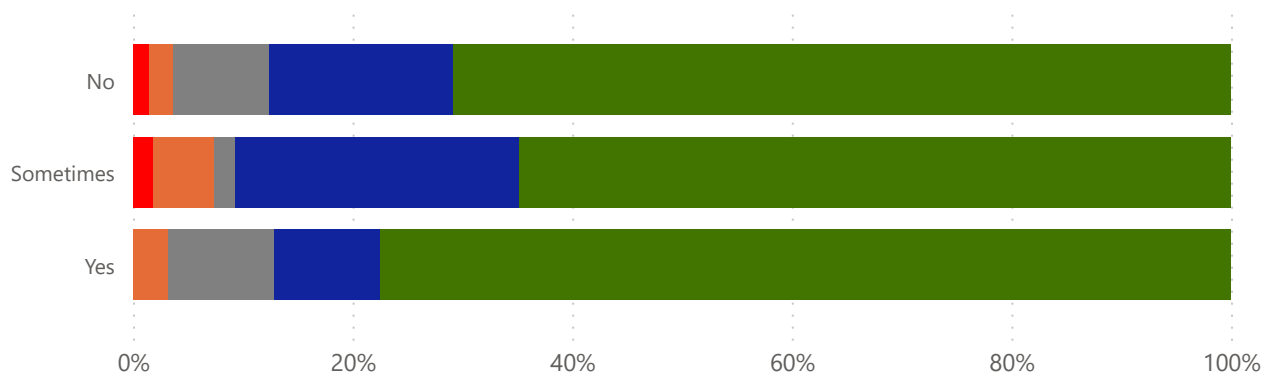
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

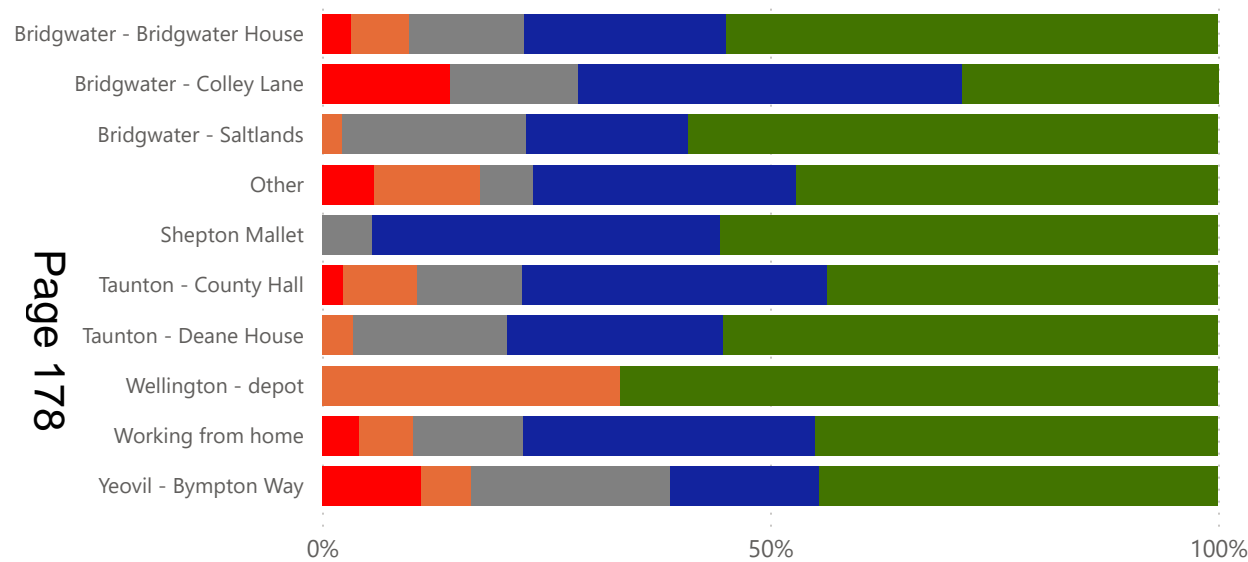
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I feel able to be involved in managing health and safety risks.

Responses by office location

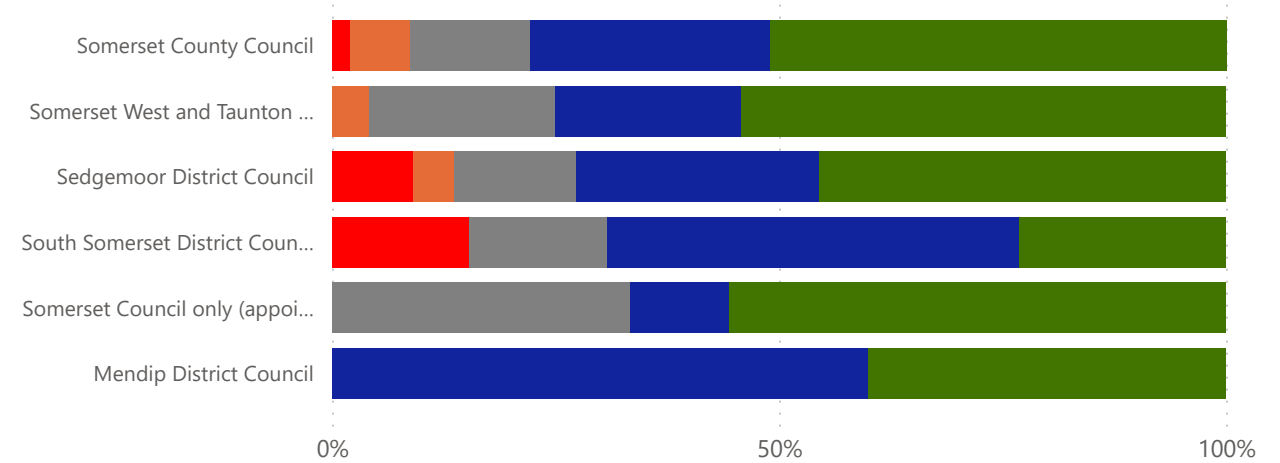
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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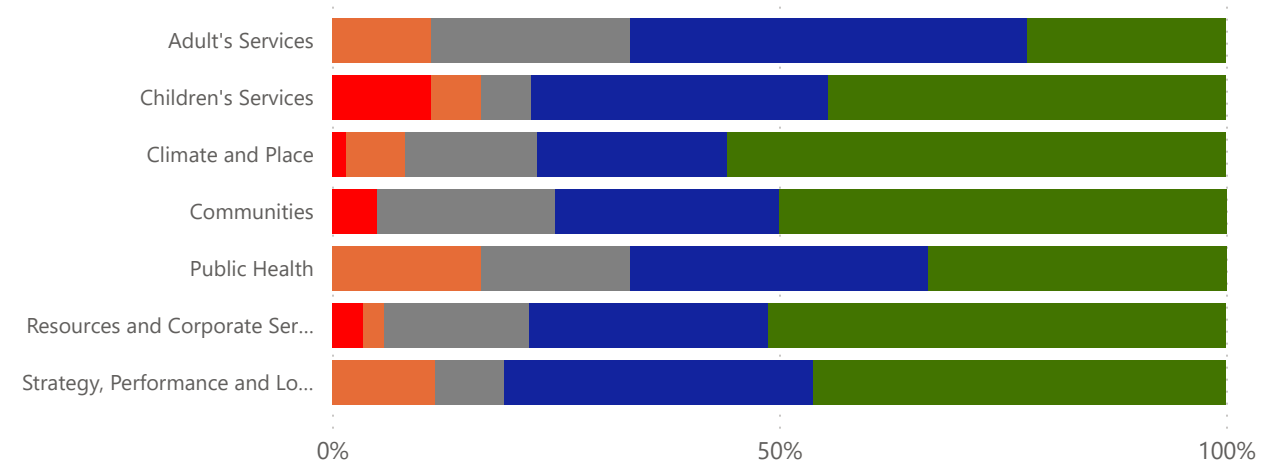
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



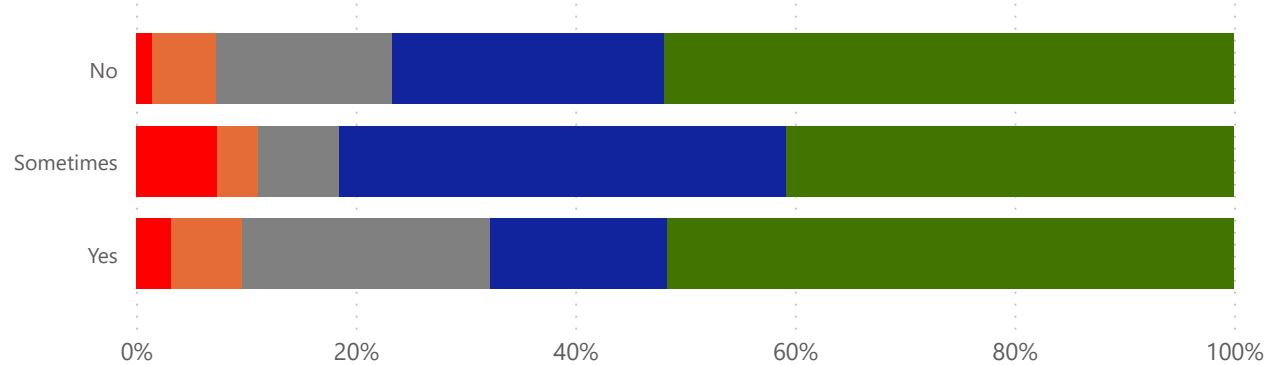
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

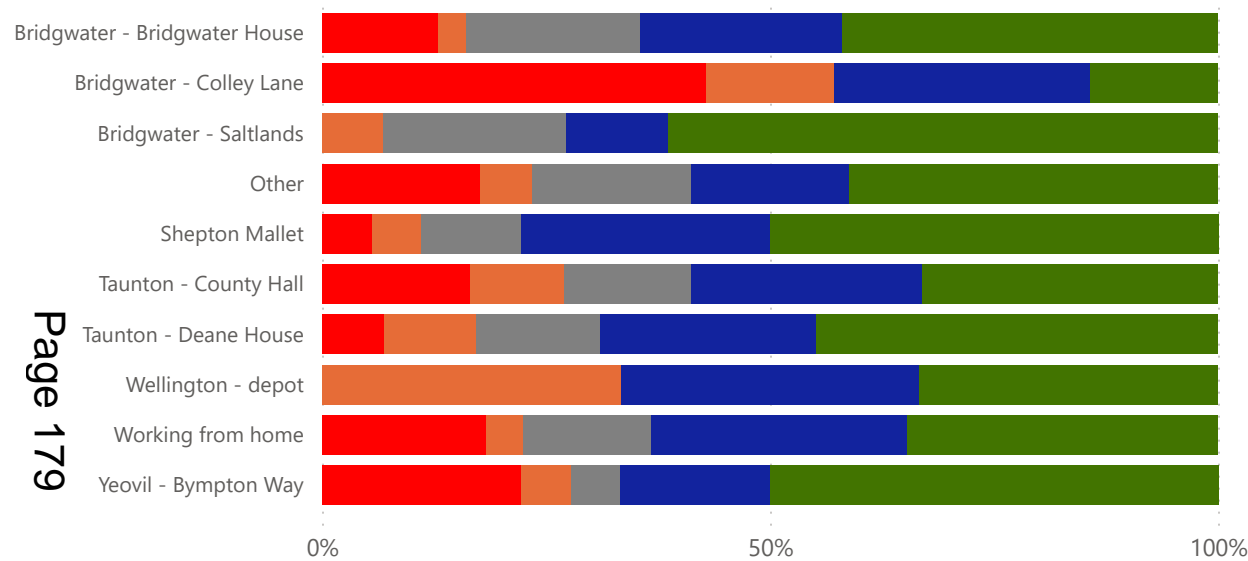
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I receive periodic training on health and safety.

Responses by office location

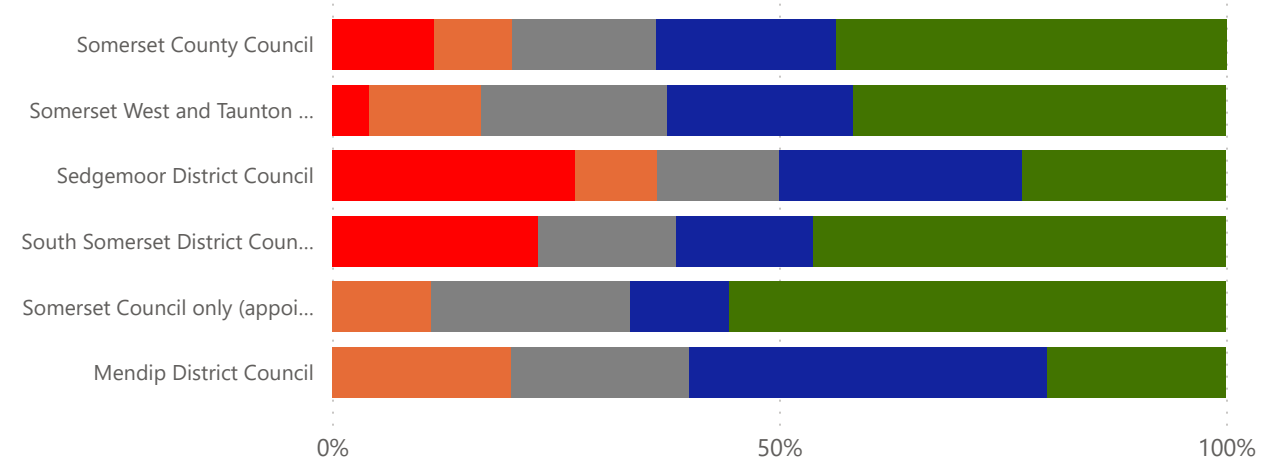
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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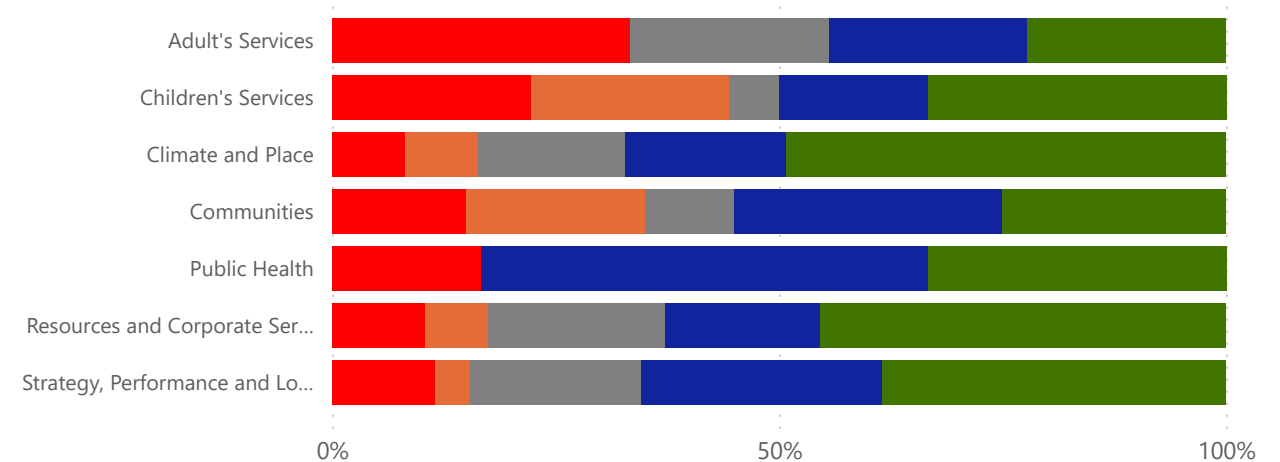
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



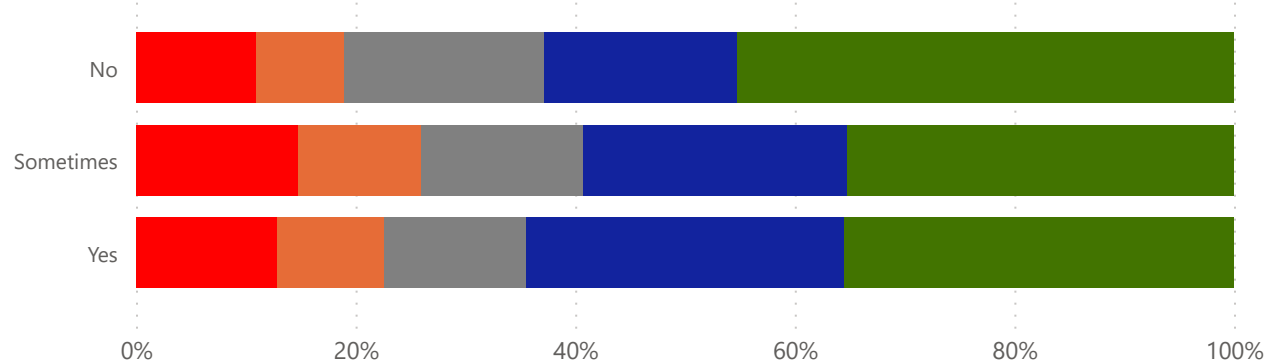
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

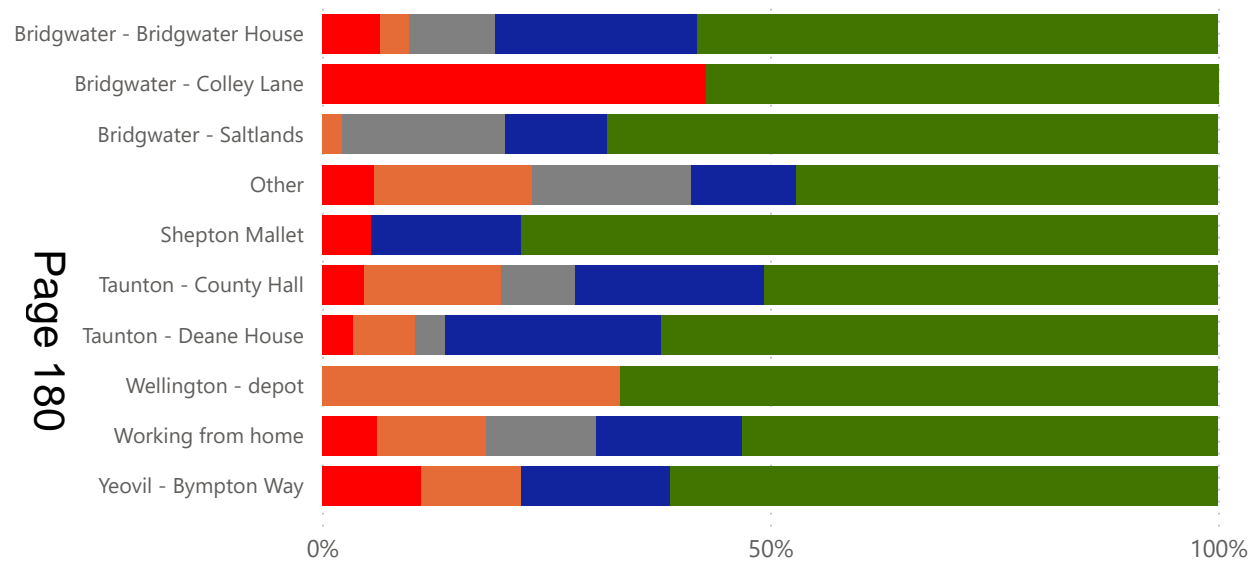
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I have received health and safety training relevant to my role. E.g. safe working procedures

Responses by office location

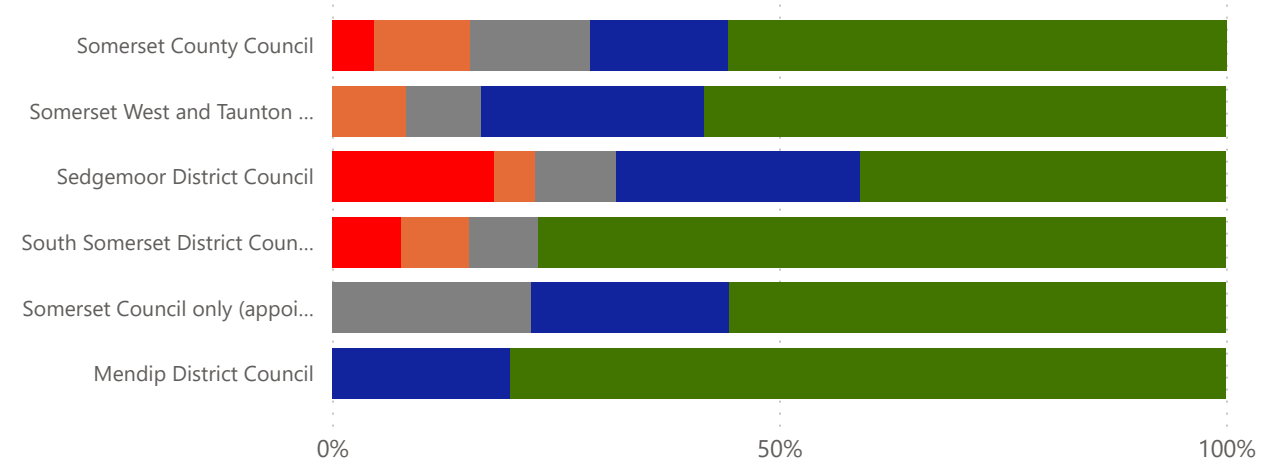
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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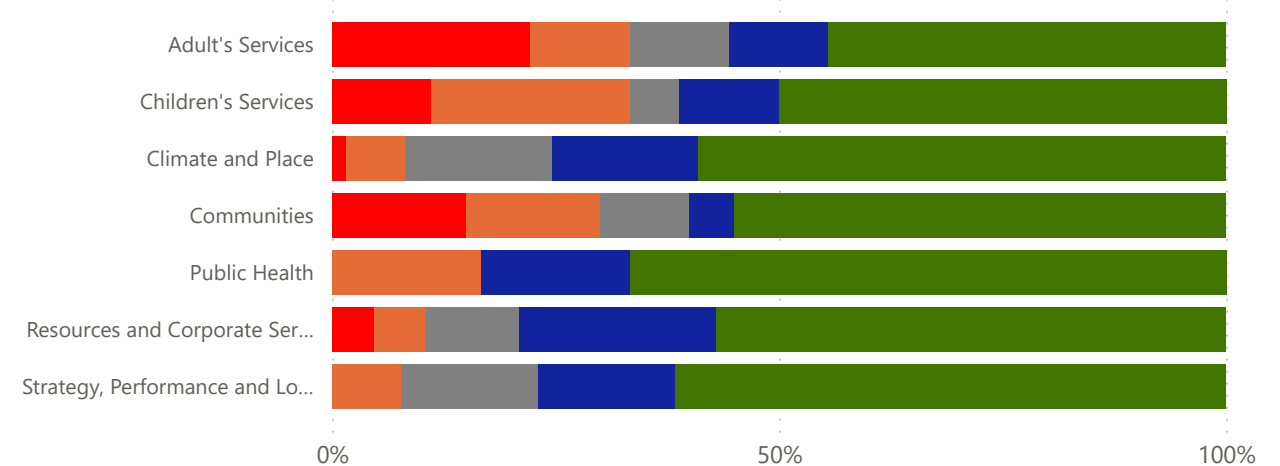
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



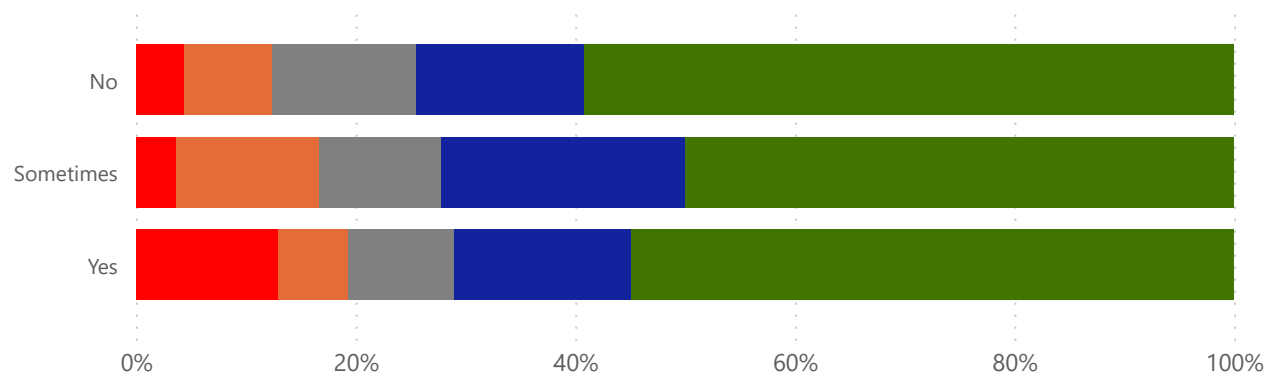
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

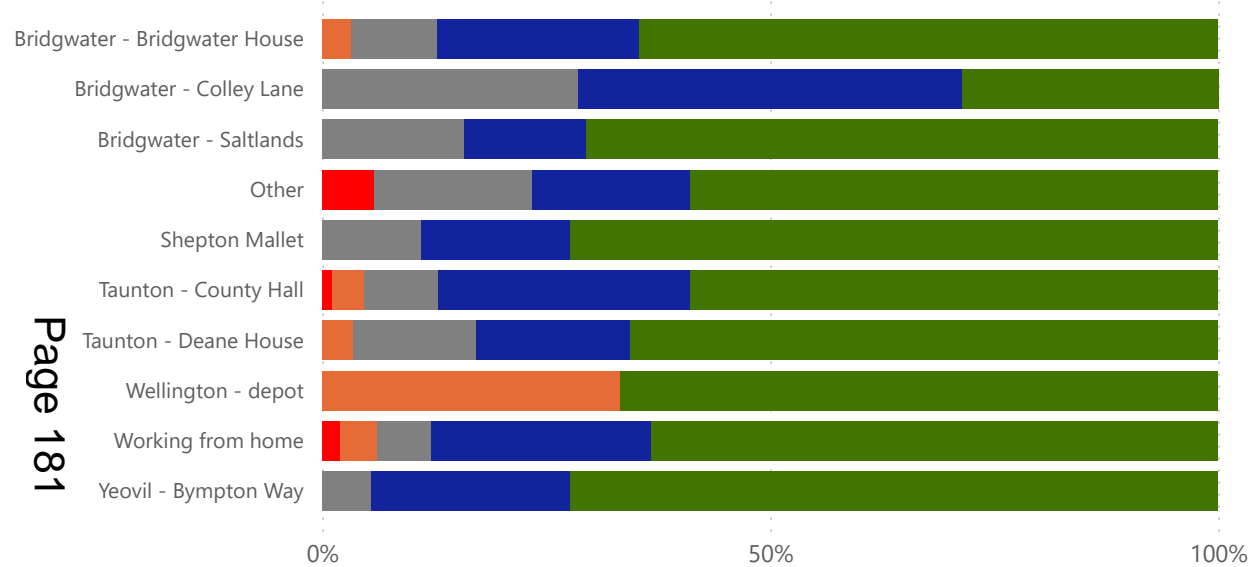
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I feel confident and competent to manage health and safety issues within my role.

Responses by office location

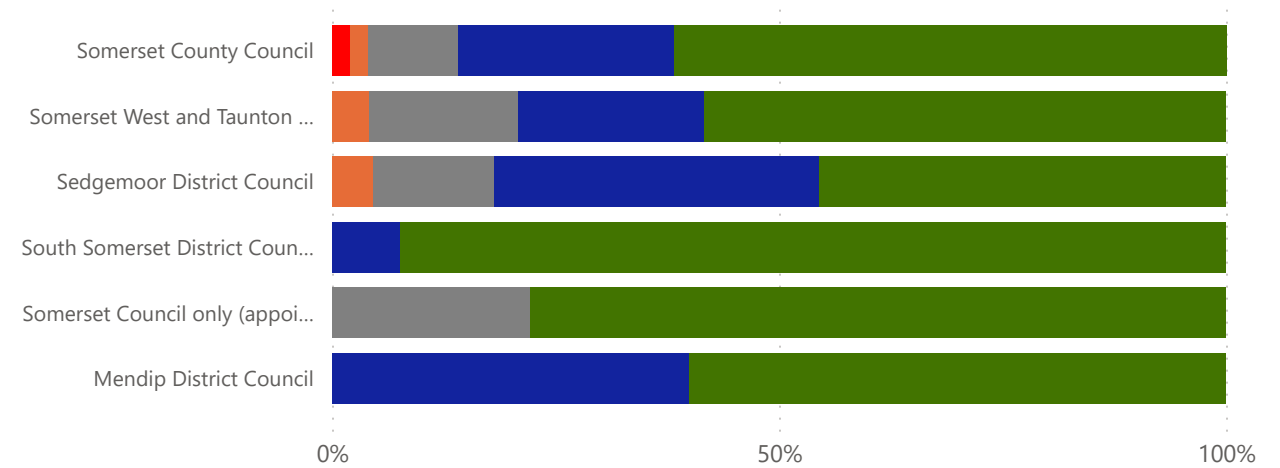
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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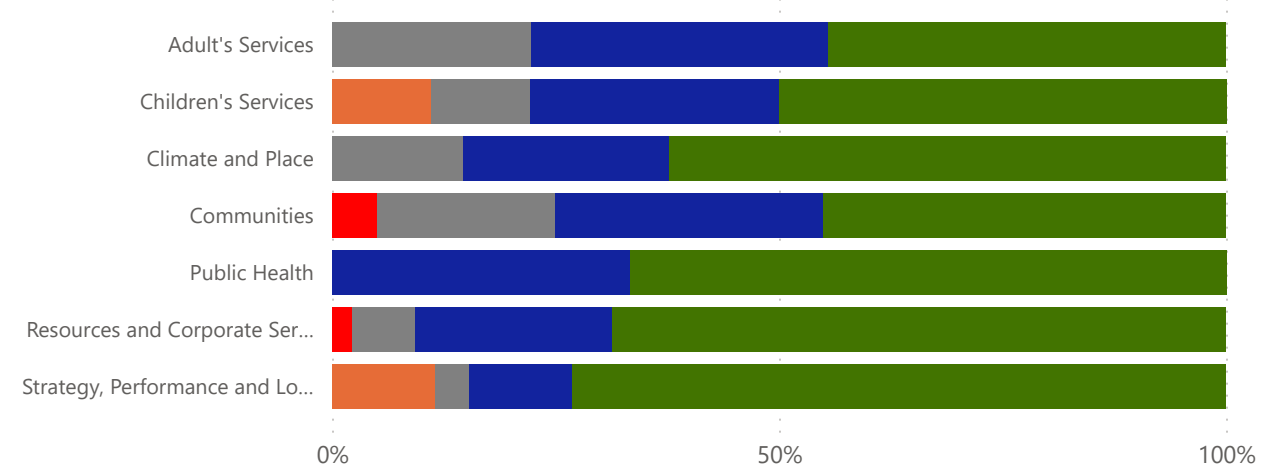
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



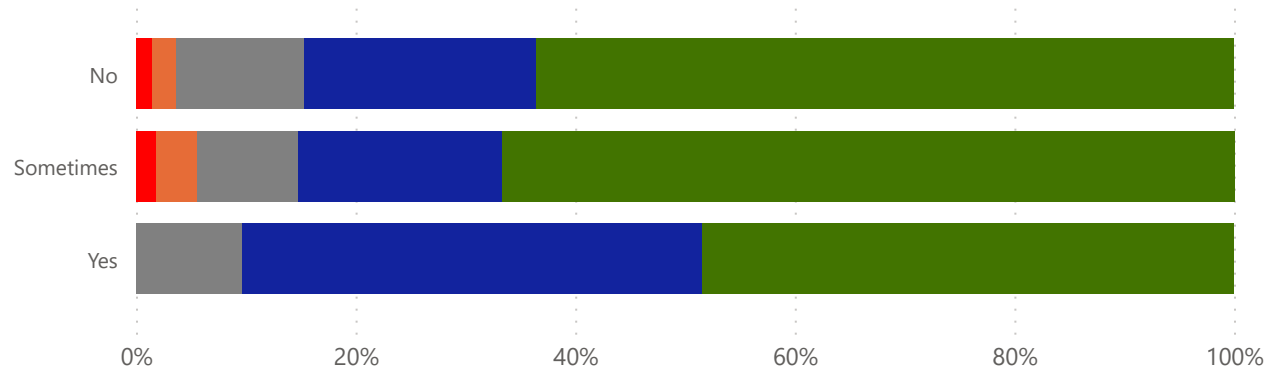
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

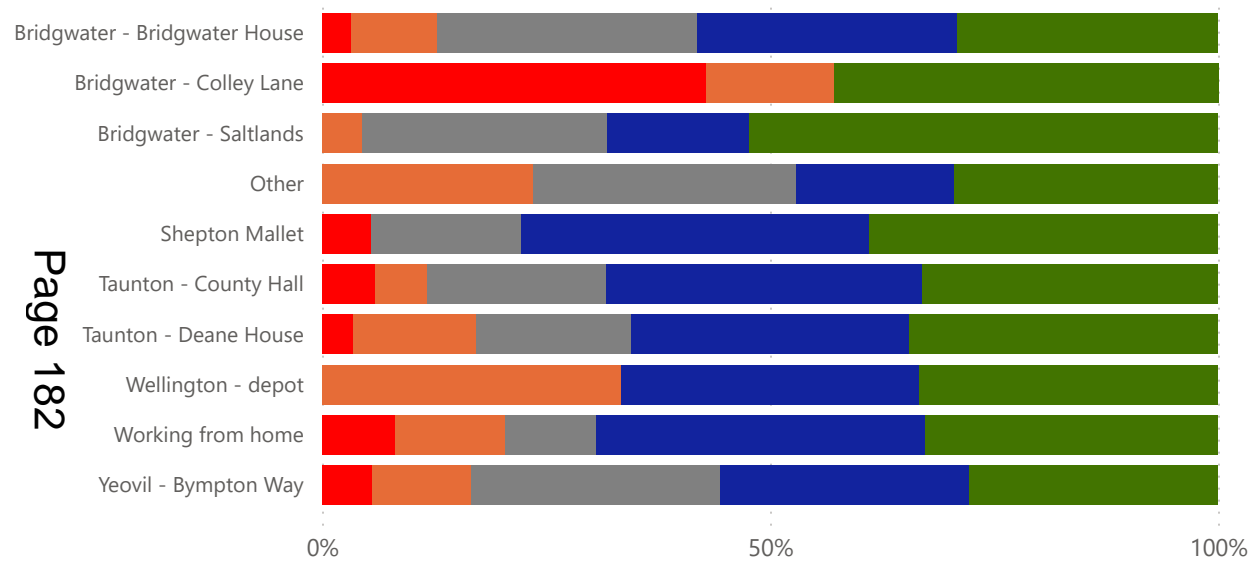
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



The organisation keeps me up to date on H&S matters.

Responses by office location

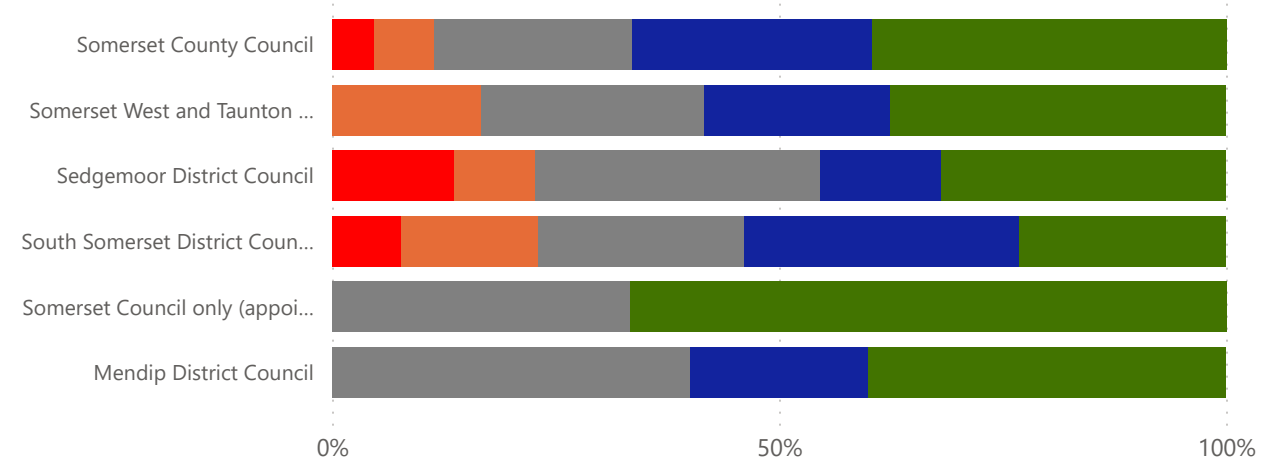
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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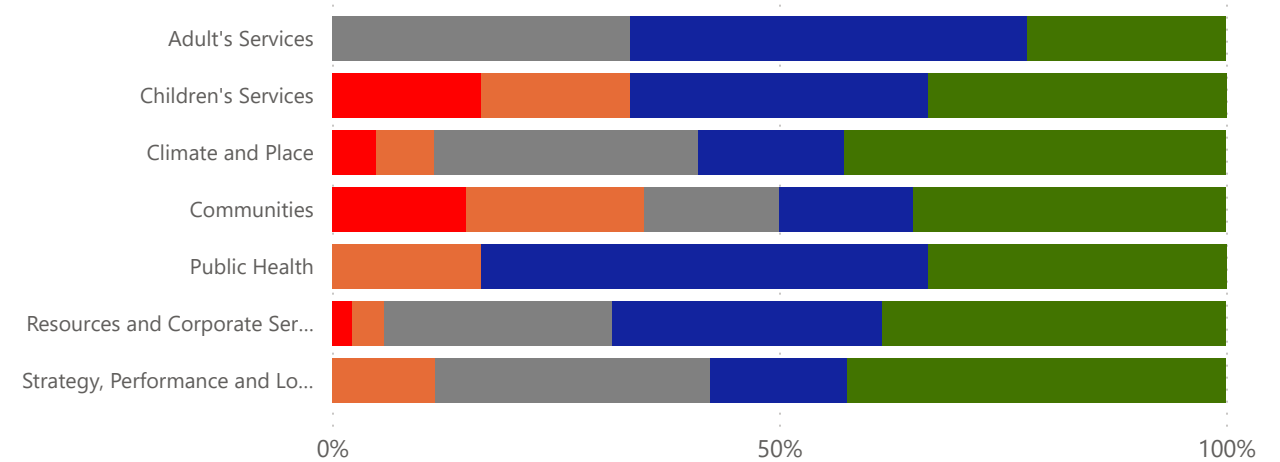
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



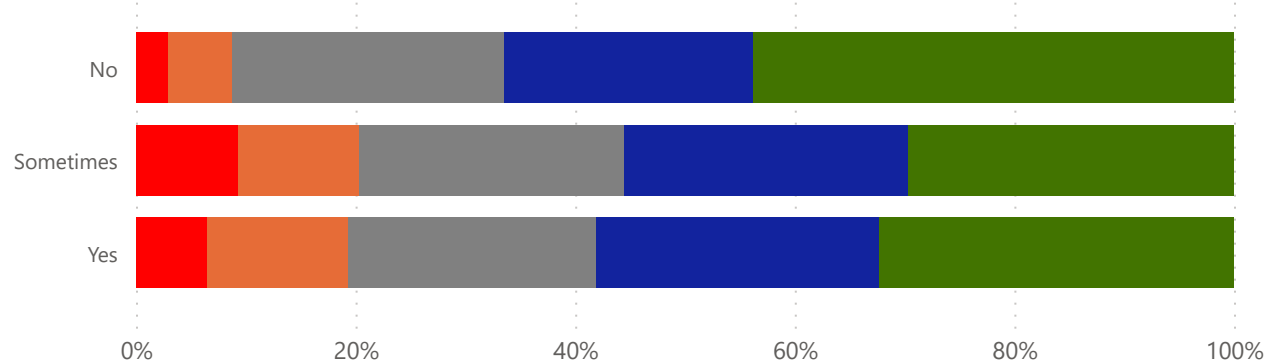
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

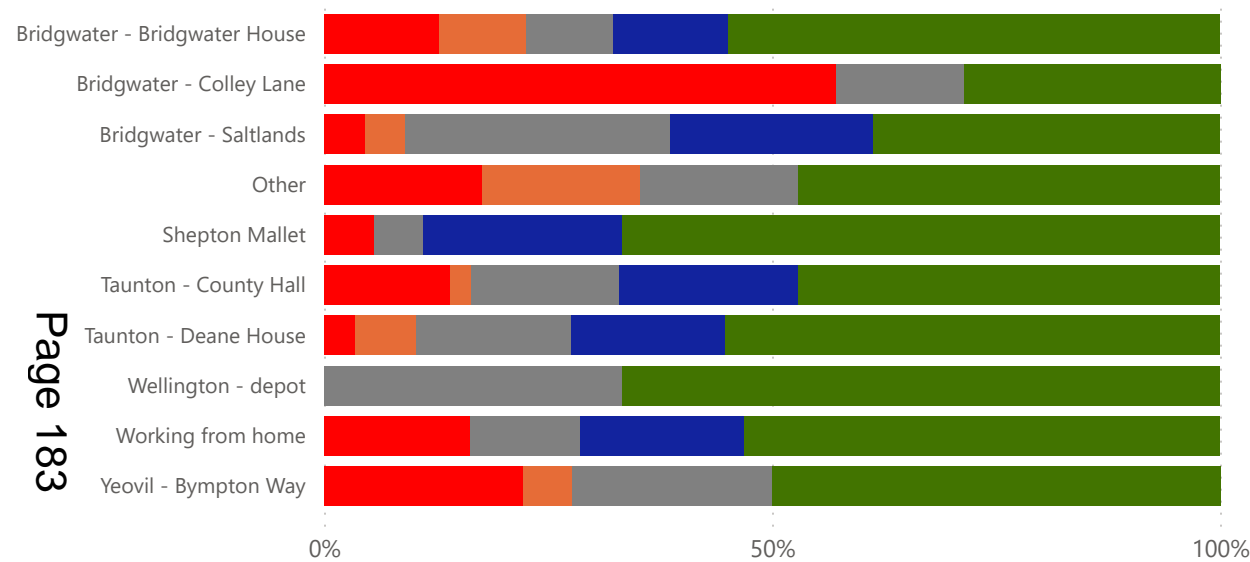
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Health and Safety is discussed periodically within team meetings.

Responses by office location

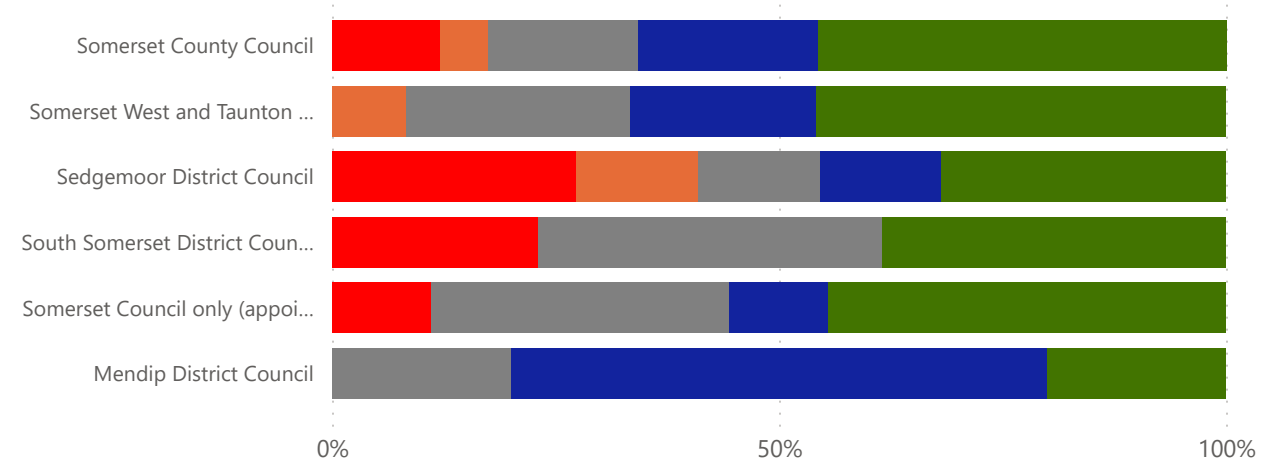
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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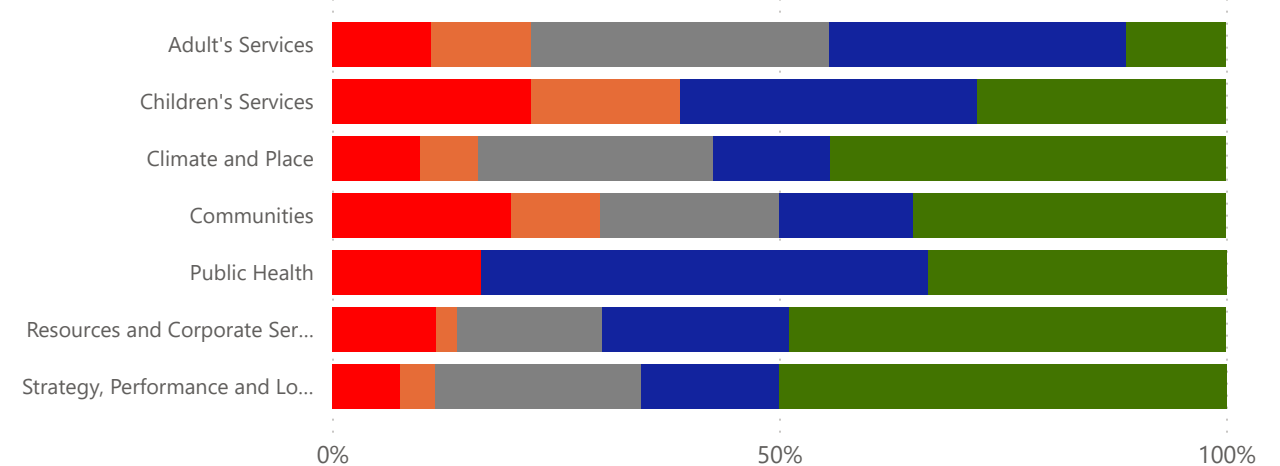
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



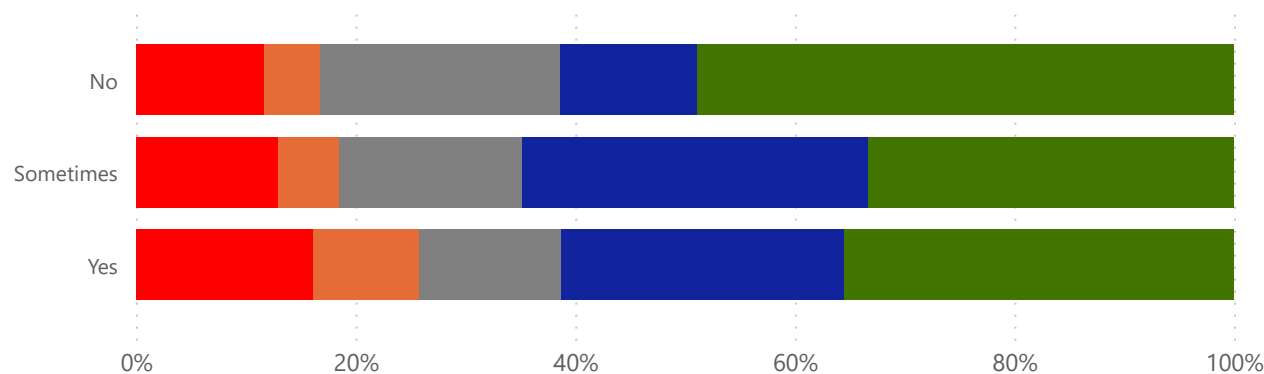
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

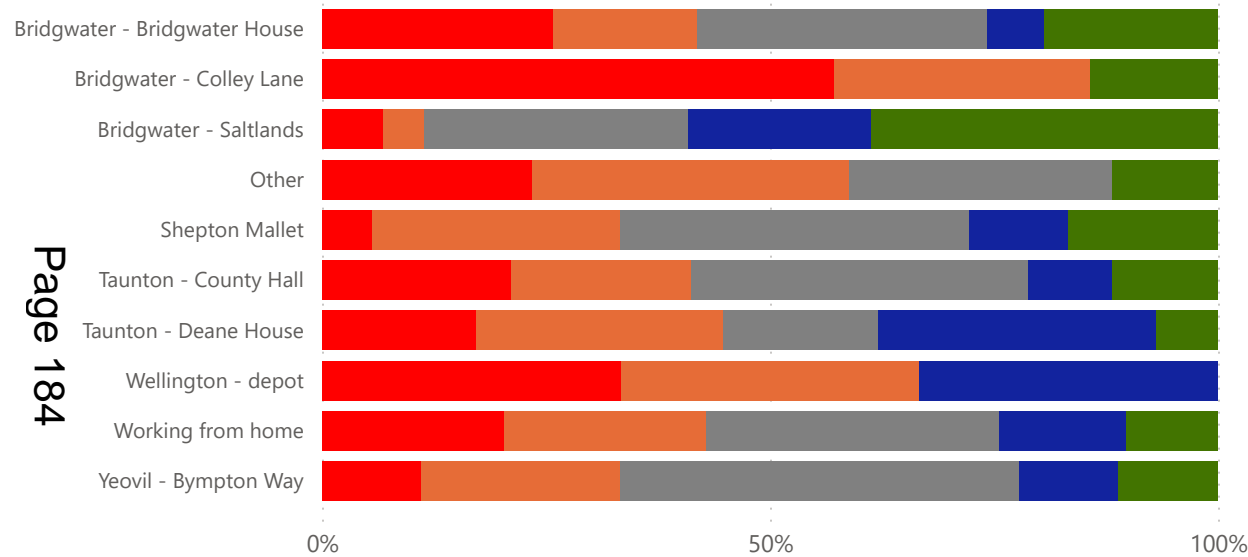
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Reports showing the Council's Health and Safety performance are shared with staff.

Responses by office location

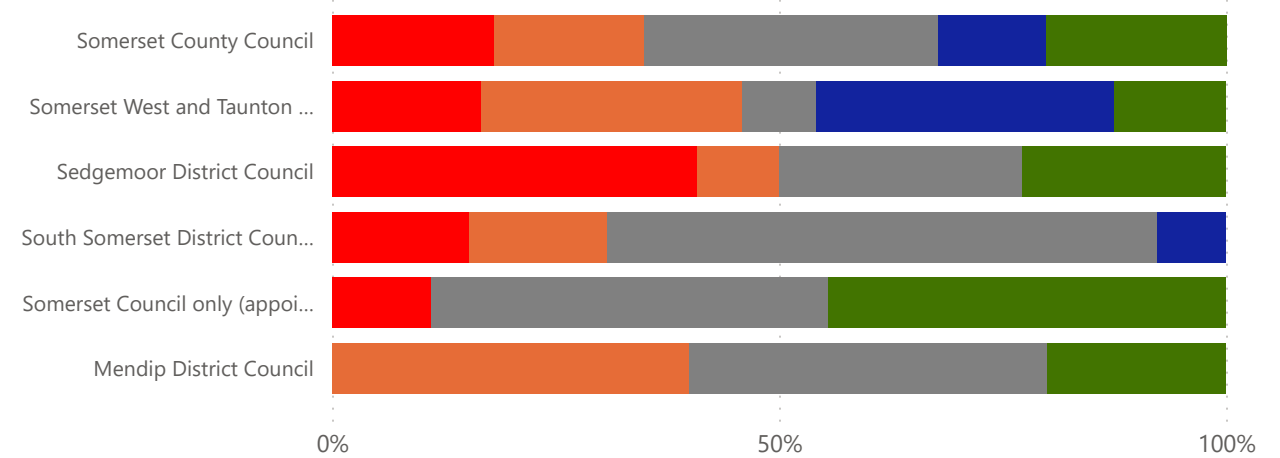
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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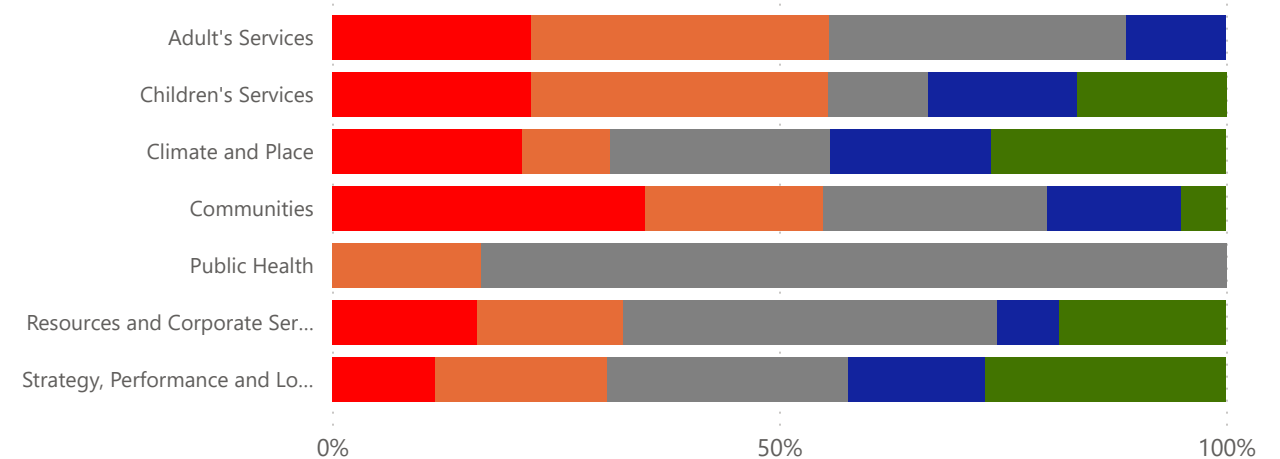
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



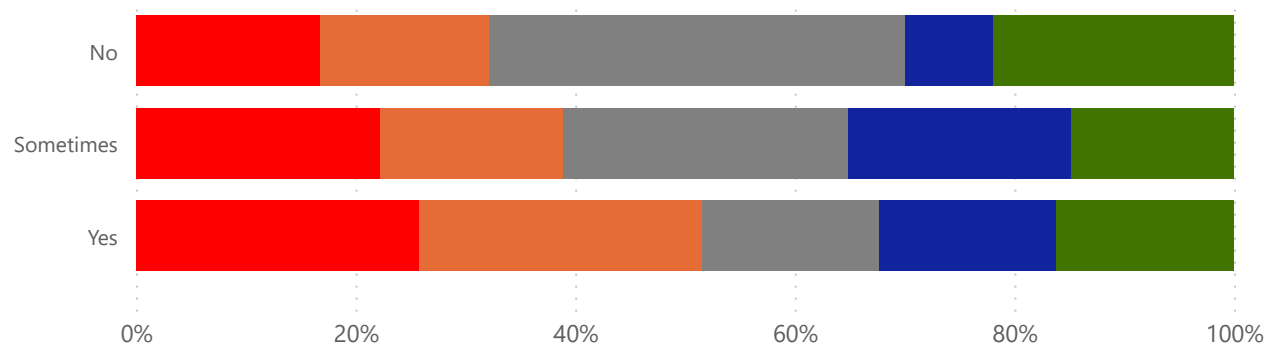
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

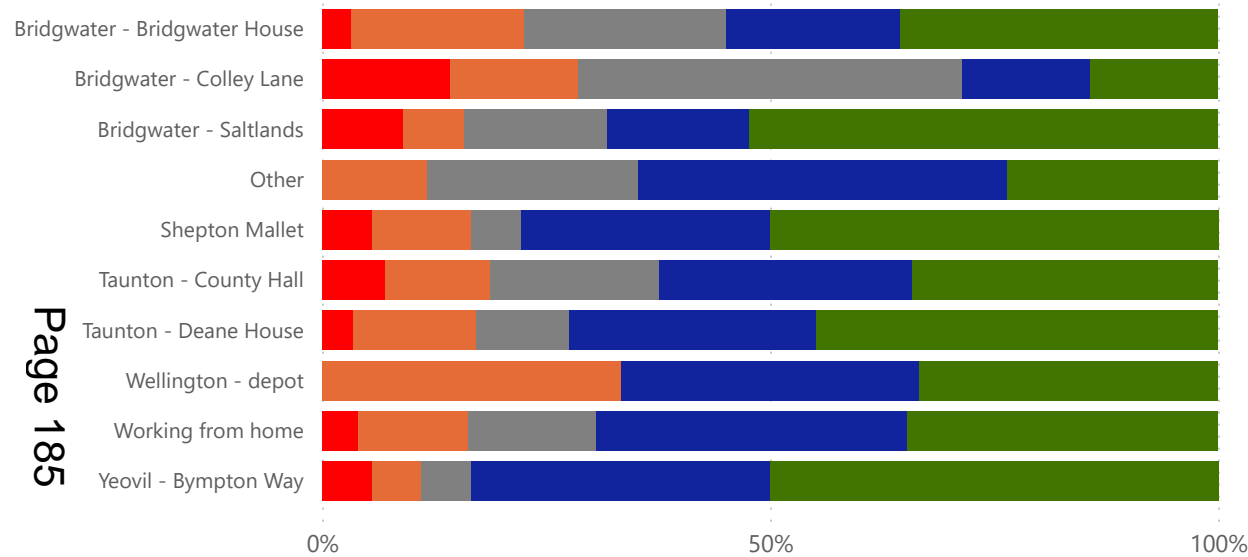
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I feel that Somerset Council promotes both physical and mental health and safety.

Responses by office location

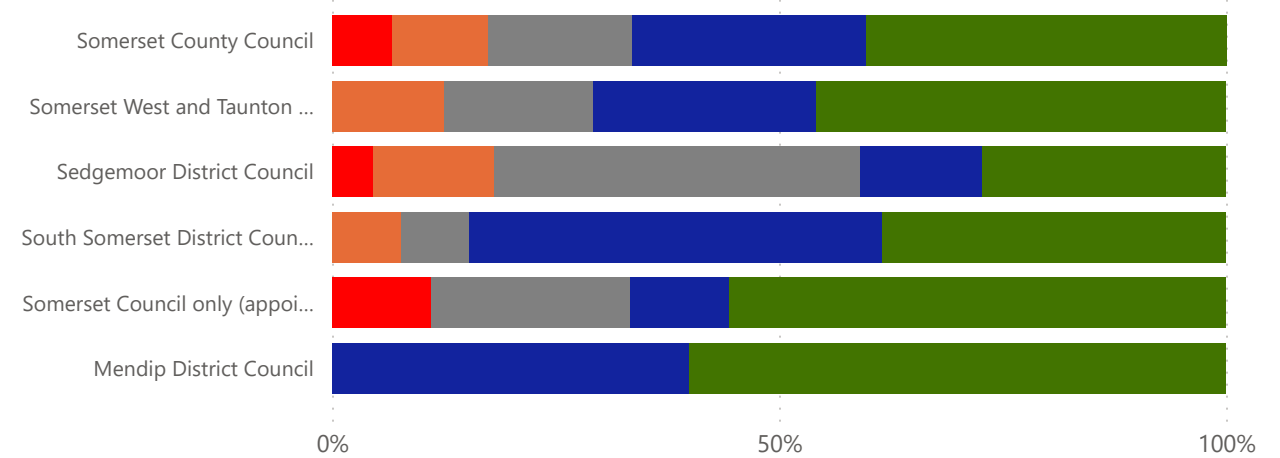
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



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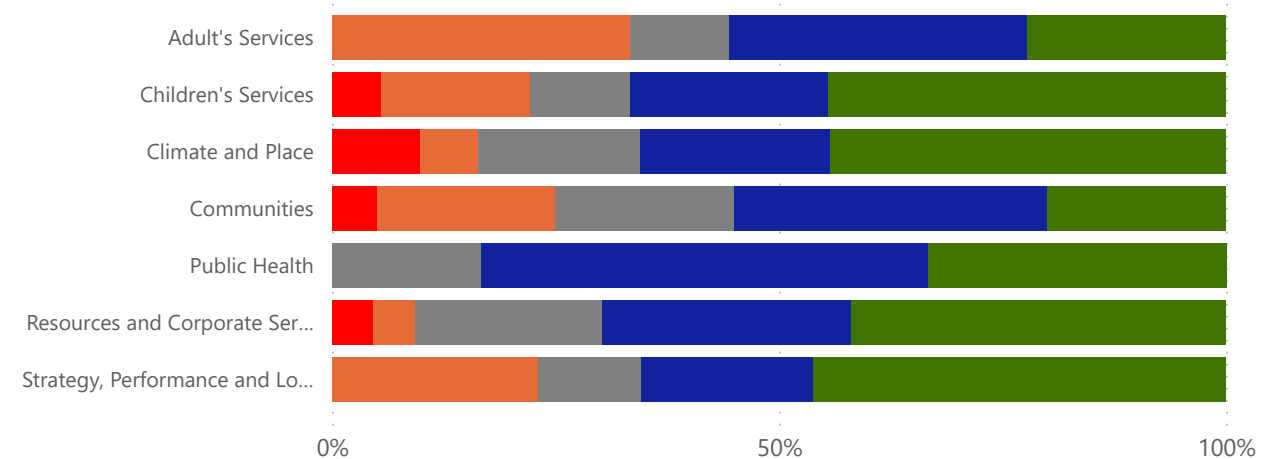
Responses by legacy organisation

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



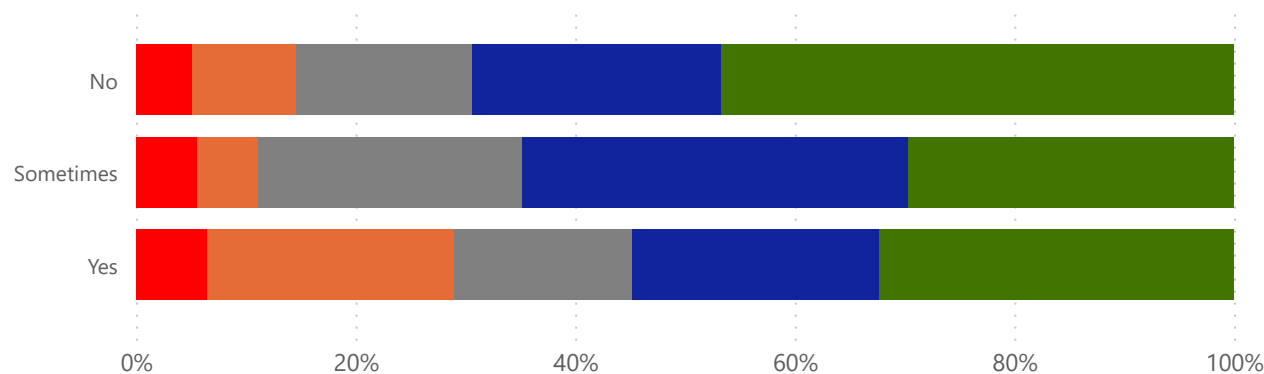
Responses by directorate

● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Are you a lone worker?

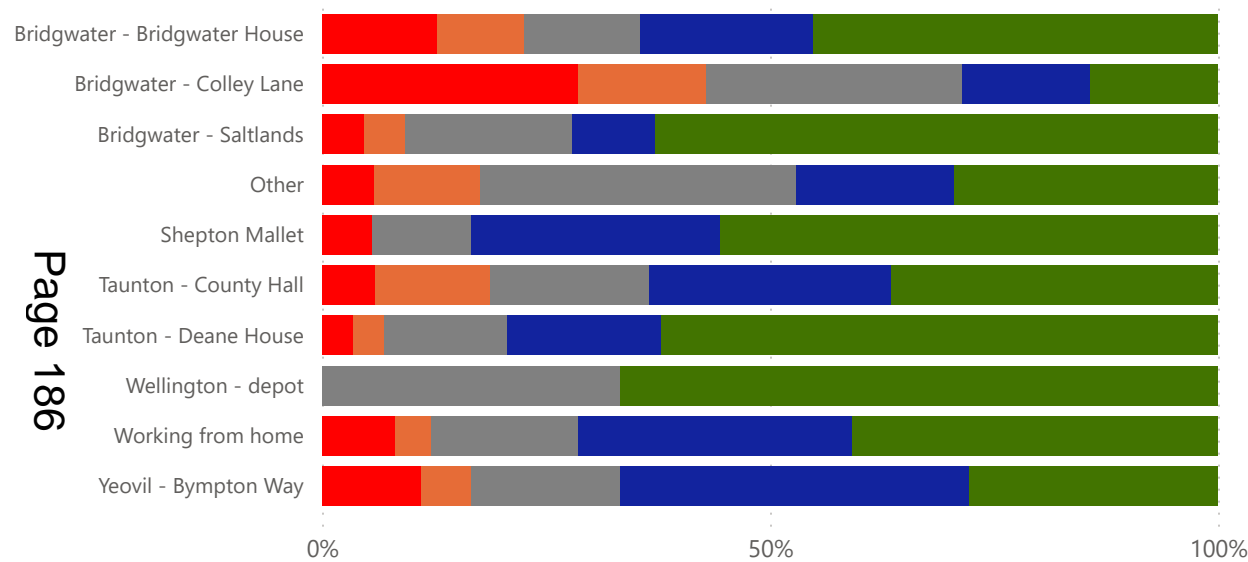
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



Managers communicate with us and listen to us about health and safety

Responses by office location

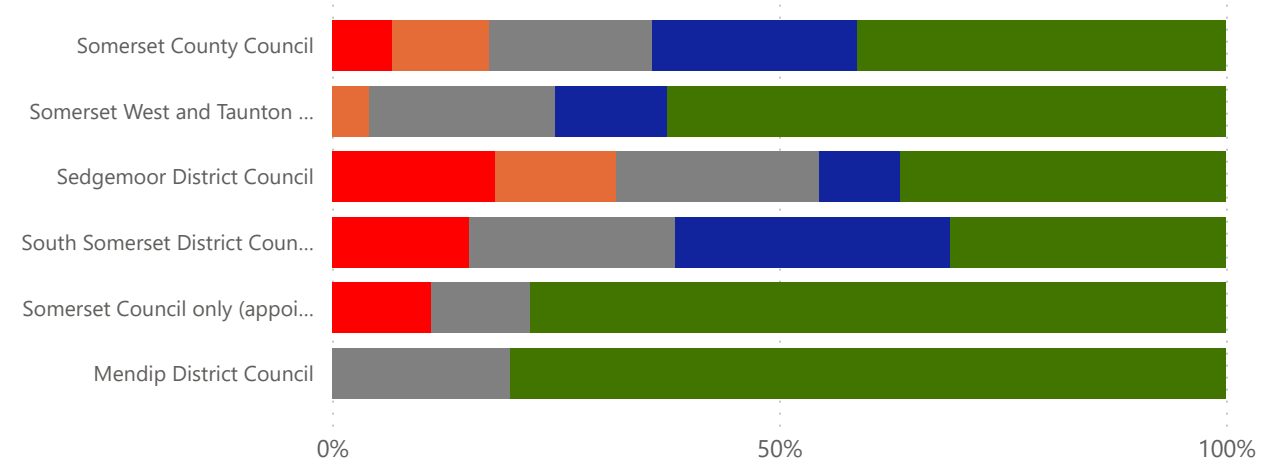
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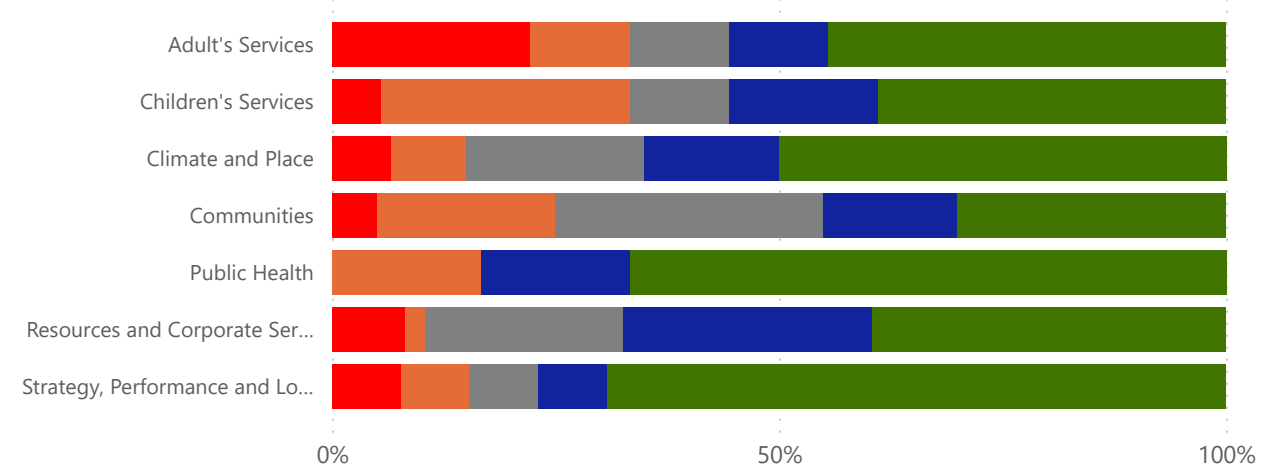
Responses by legacy organisation

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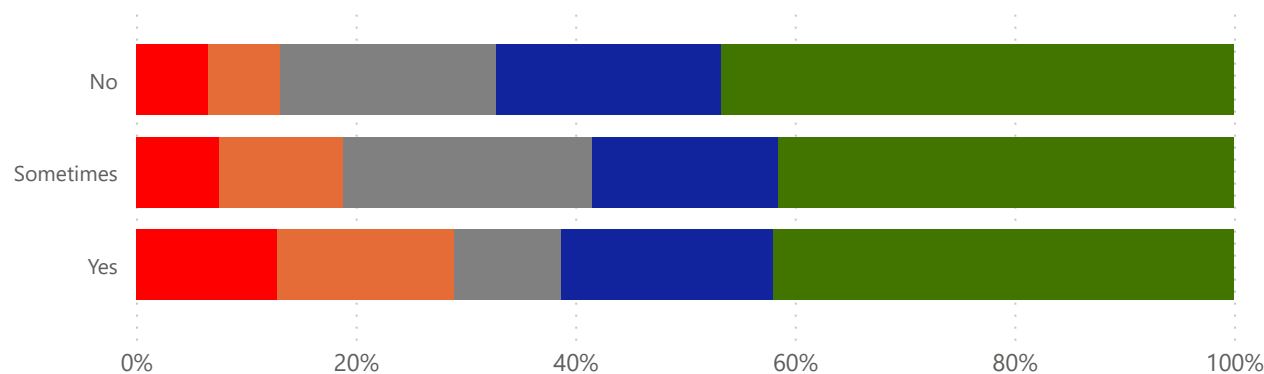
Responses by directorate

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Are you a lone worker?

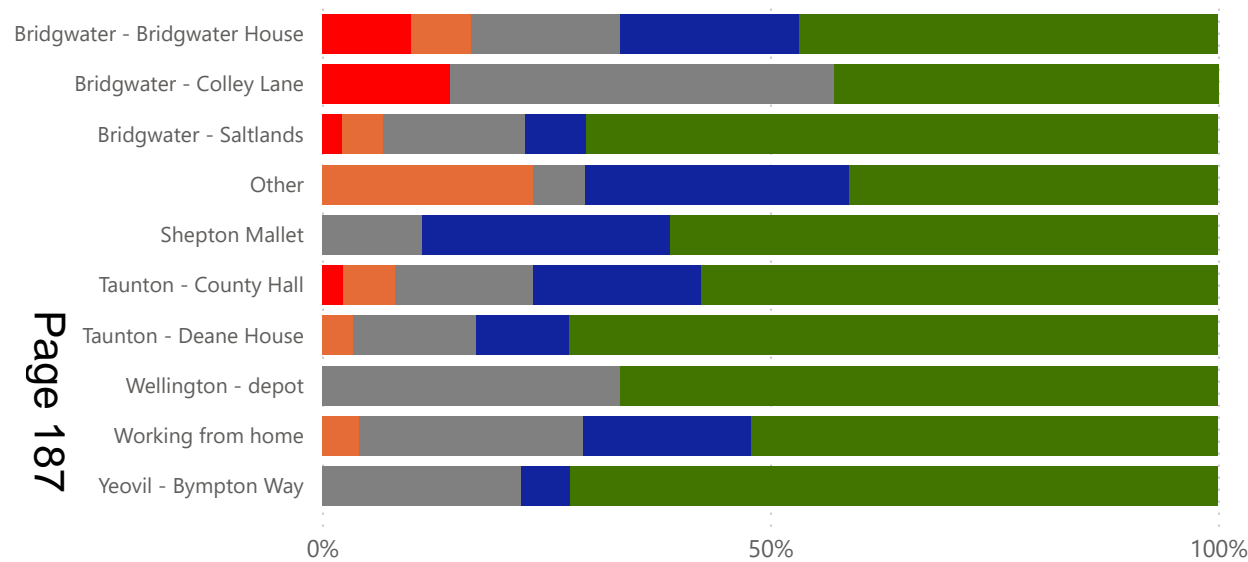
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I do not see regular violations of health and safety practice within my work.

Responses by office location

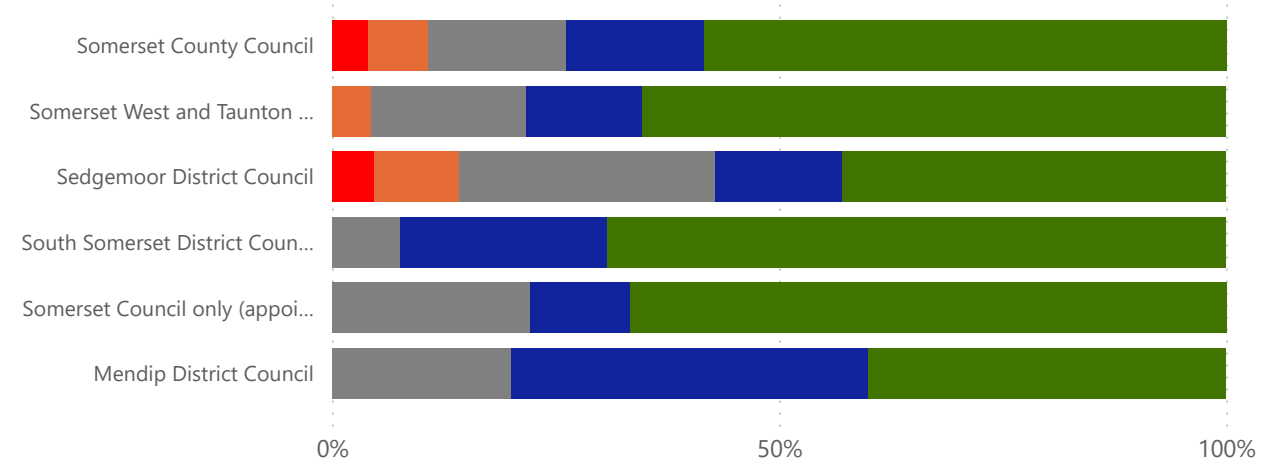
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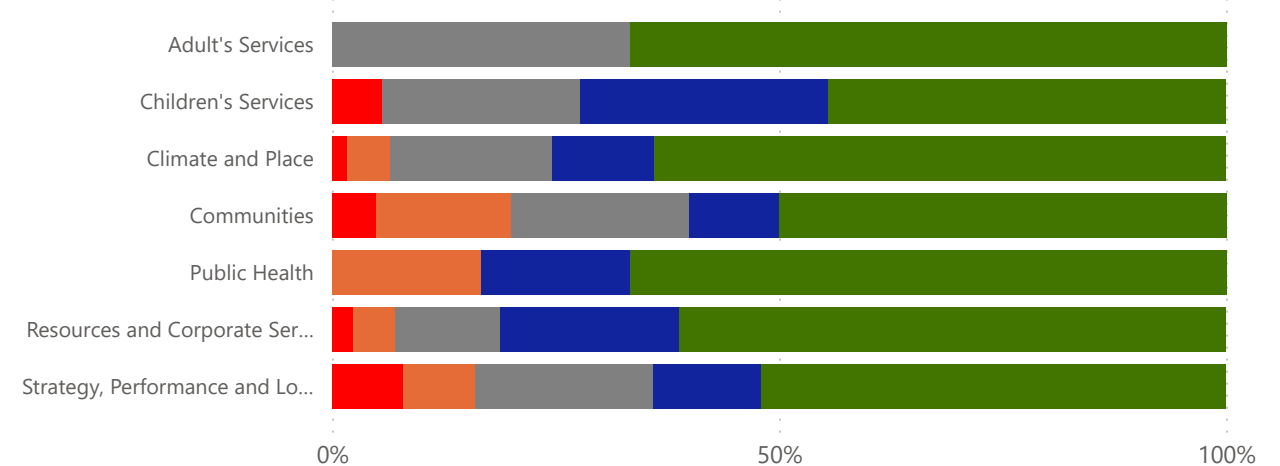
Responses by legacy organisation

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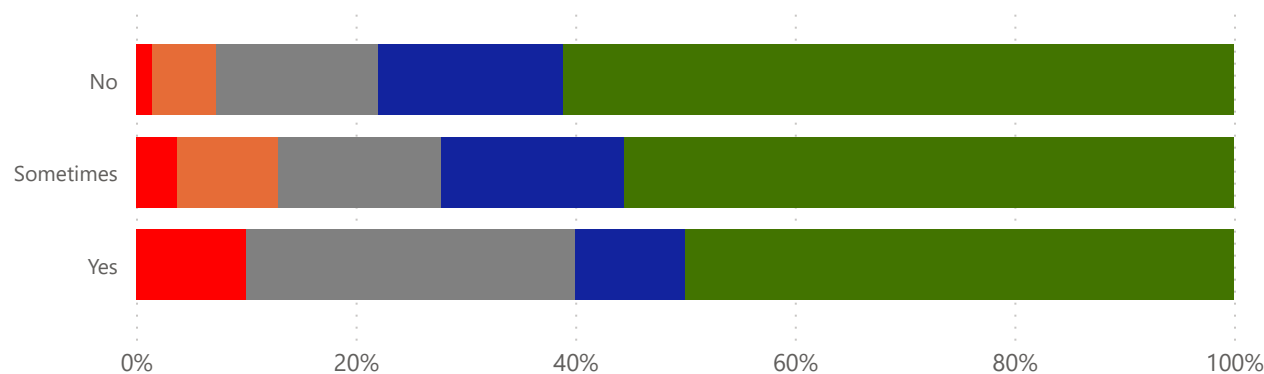
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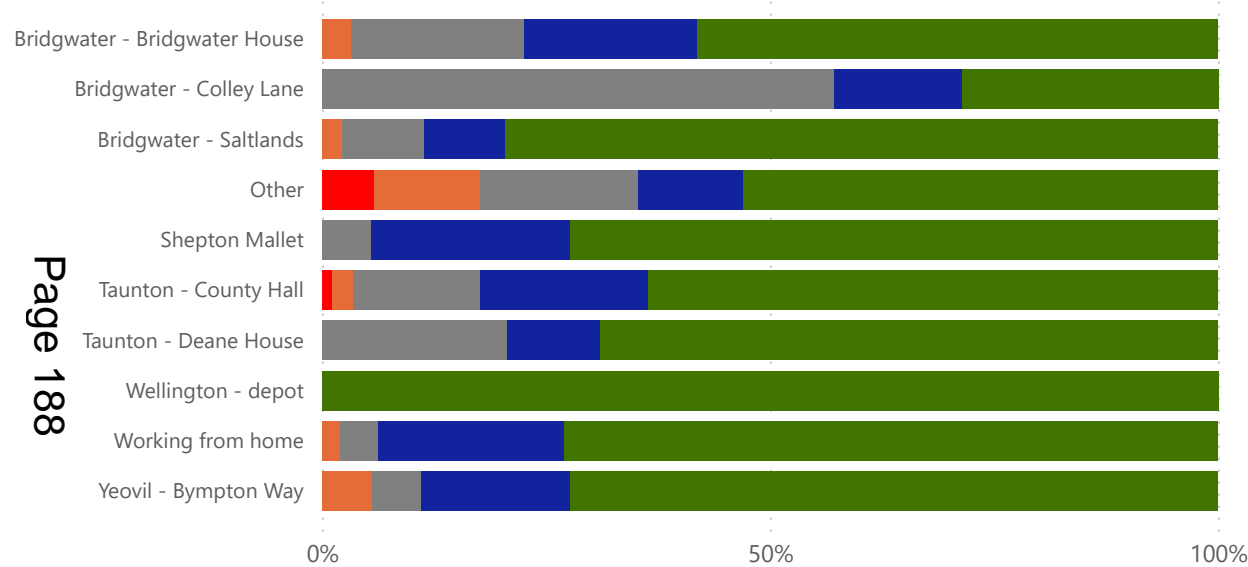
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I feel safe working for Somerset Council.

Responses by office location

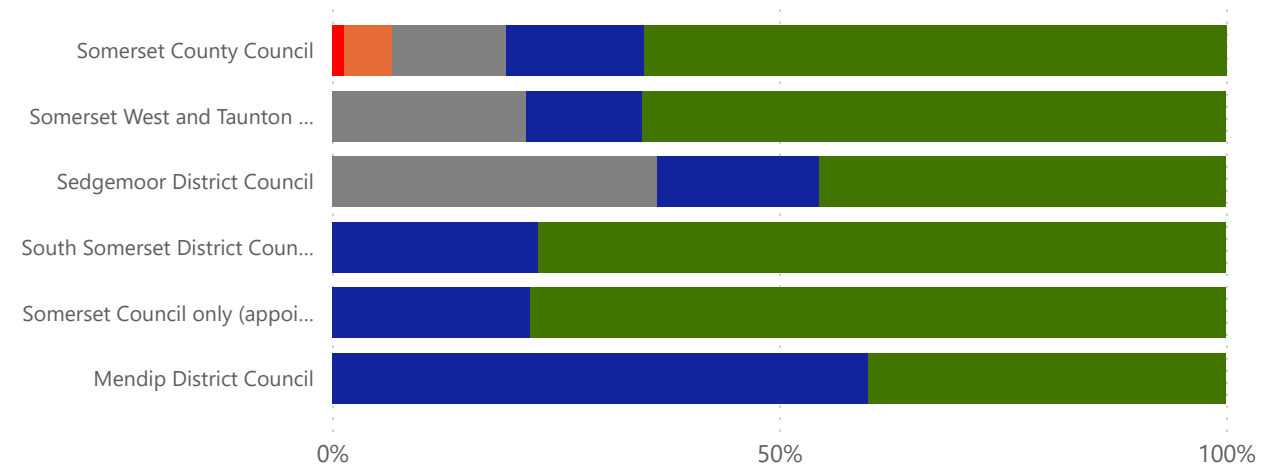
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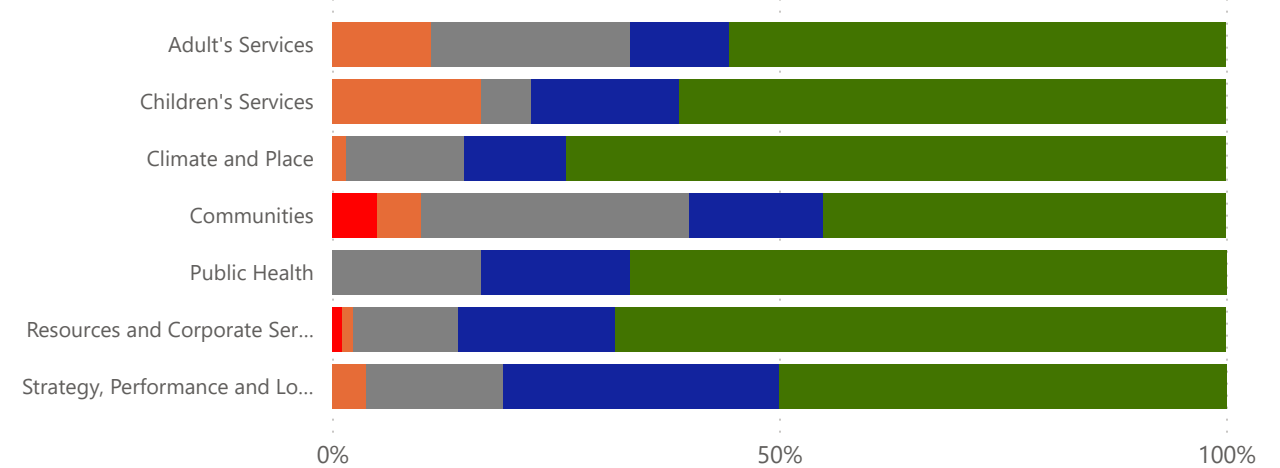
Responses by legacy organisation

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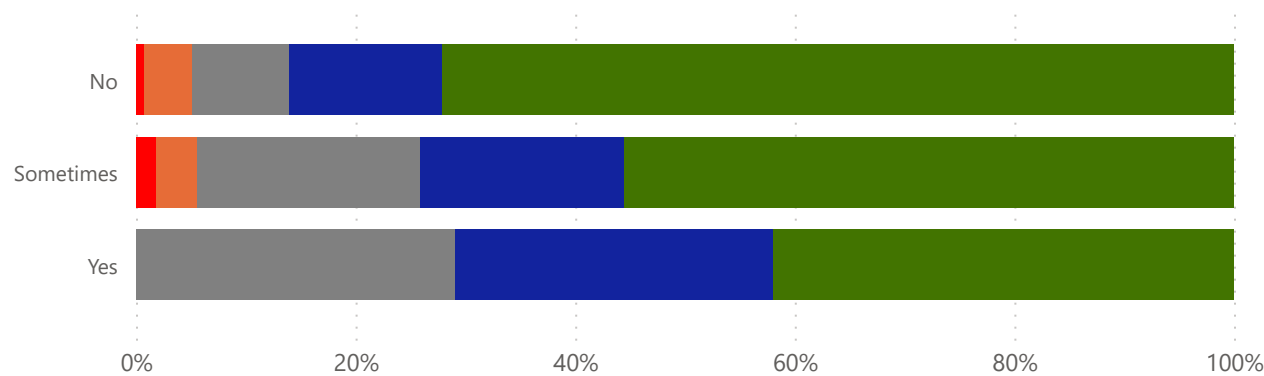
Responses by directorate

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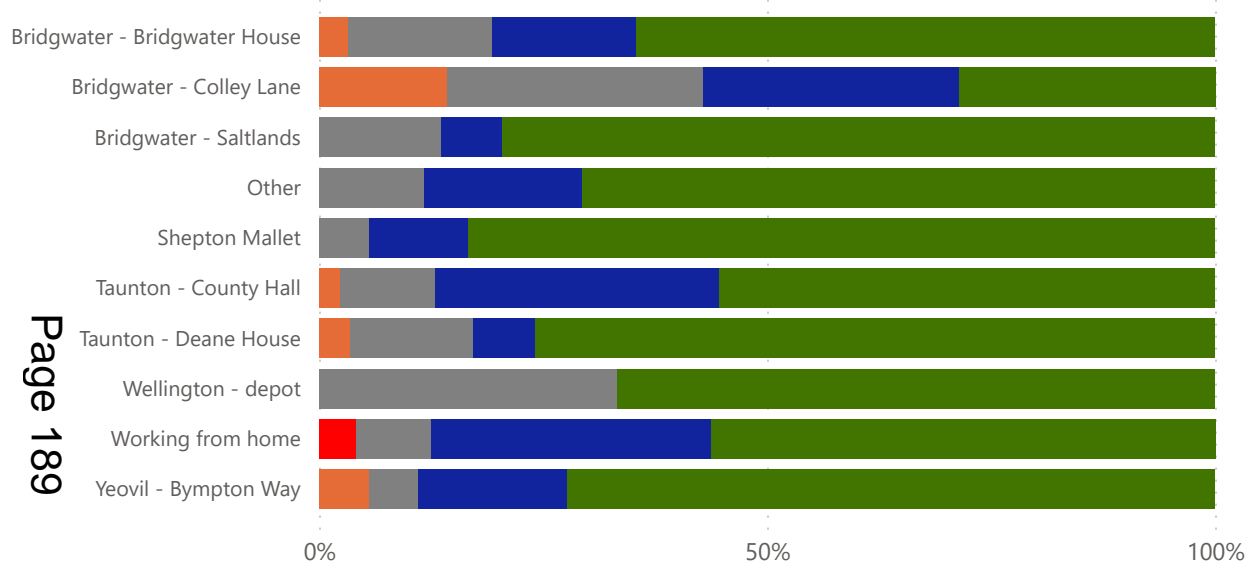
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I am aware of the relevant health and safety procedures for my role.

Responses by office location

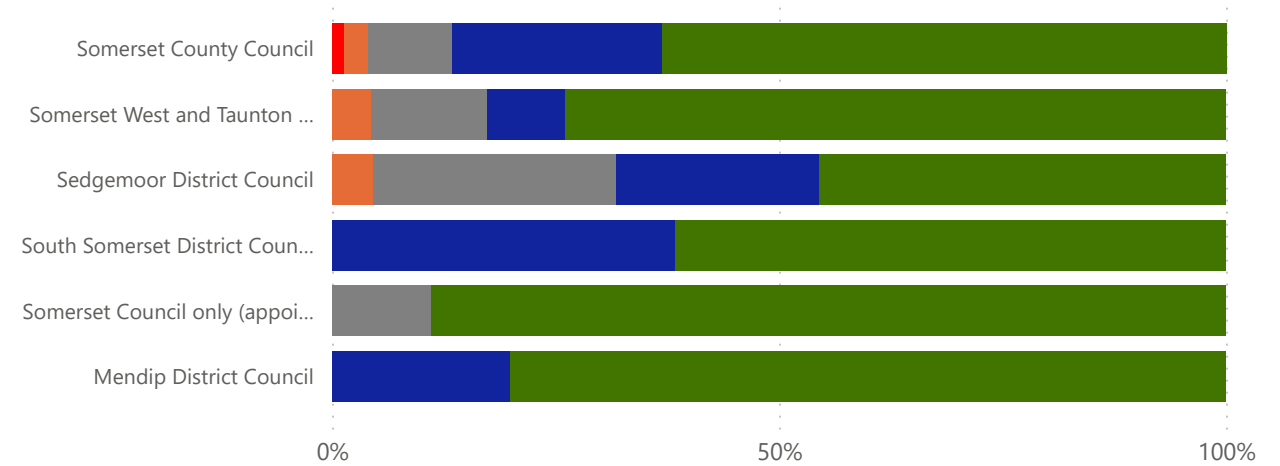
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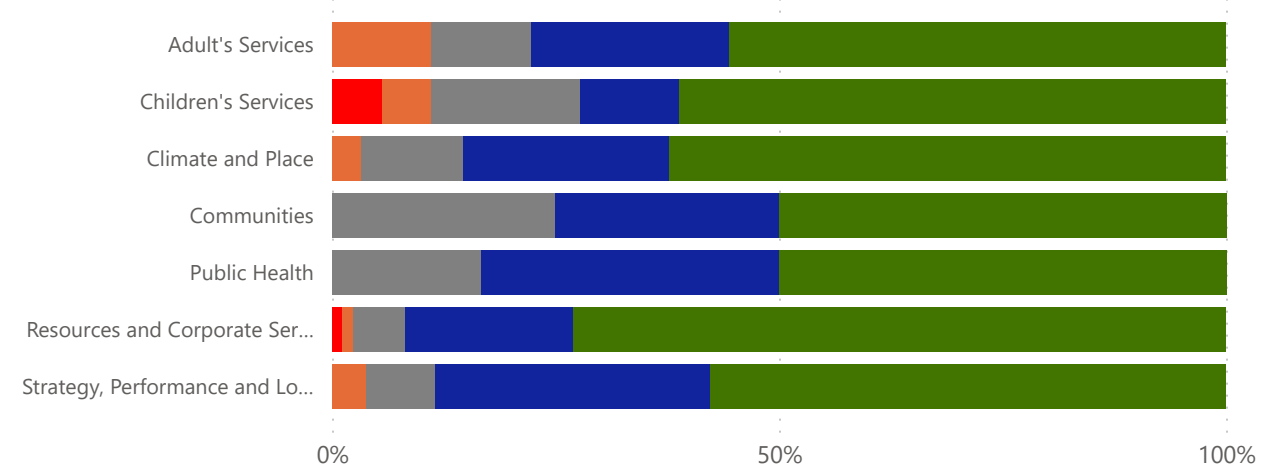
Responses by legacy organisation

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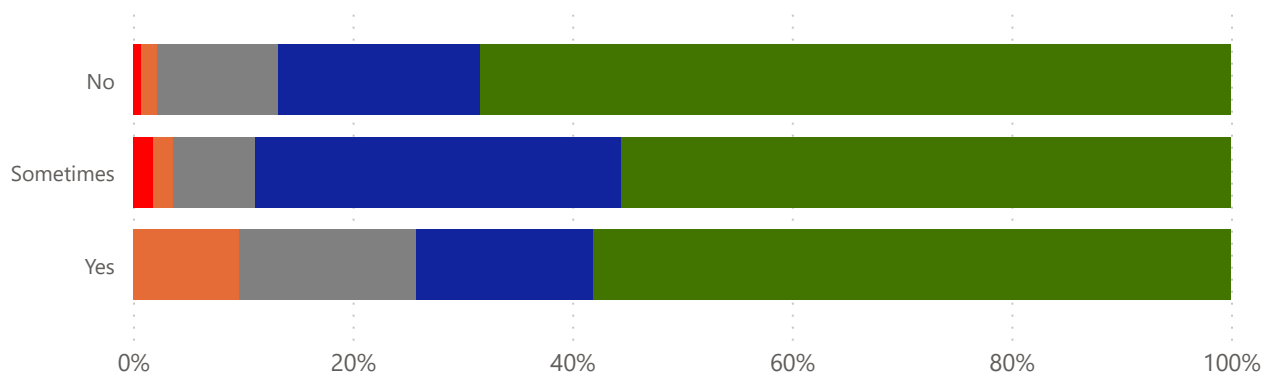
Responses by directorate

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Are you a lone worker?

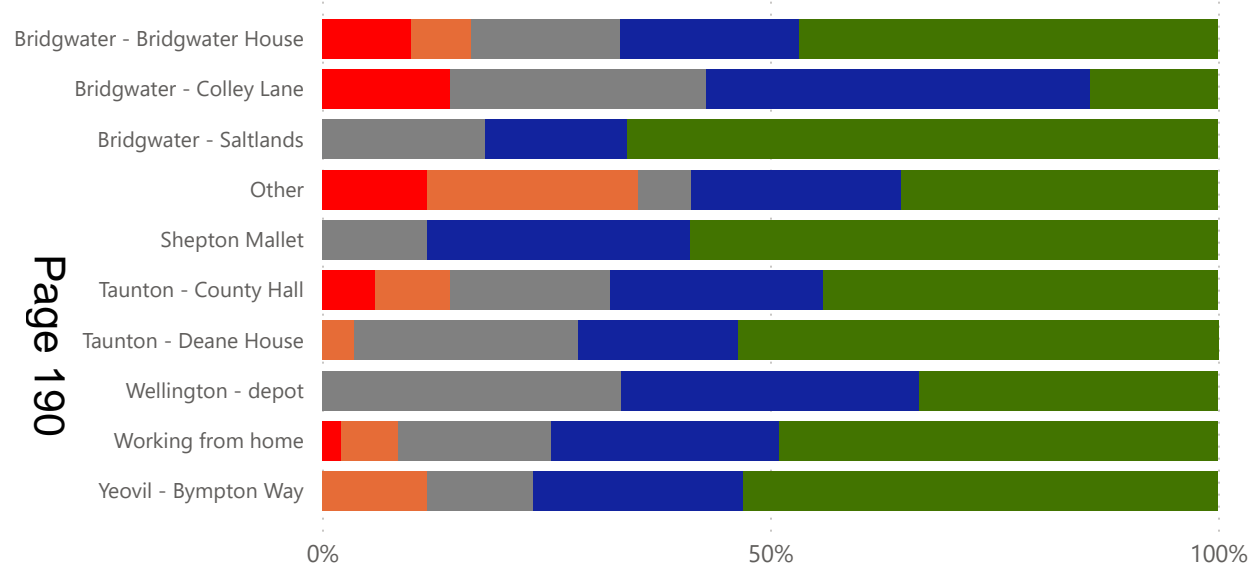
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I am confident that the health and safety risks in my area have been properly defined and are being managed.

Responses by office location

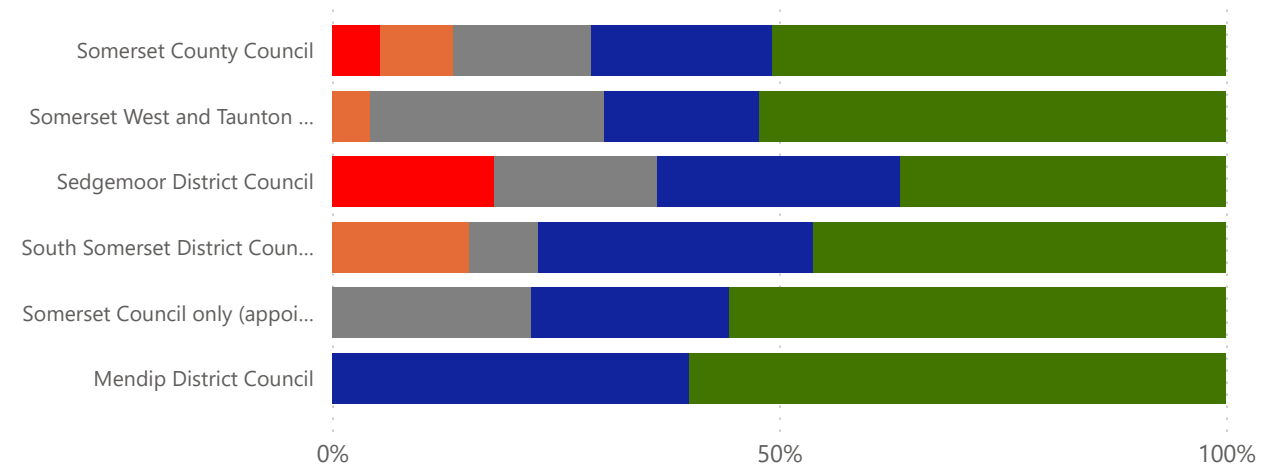
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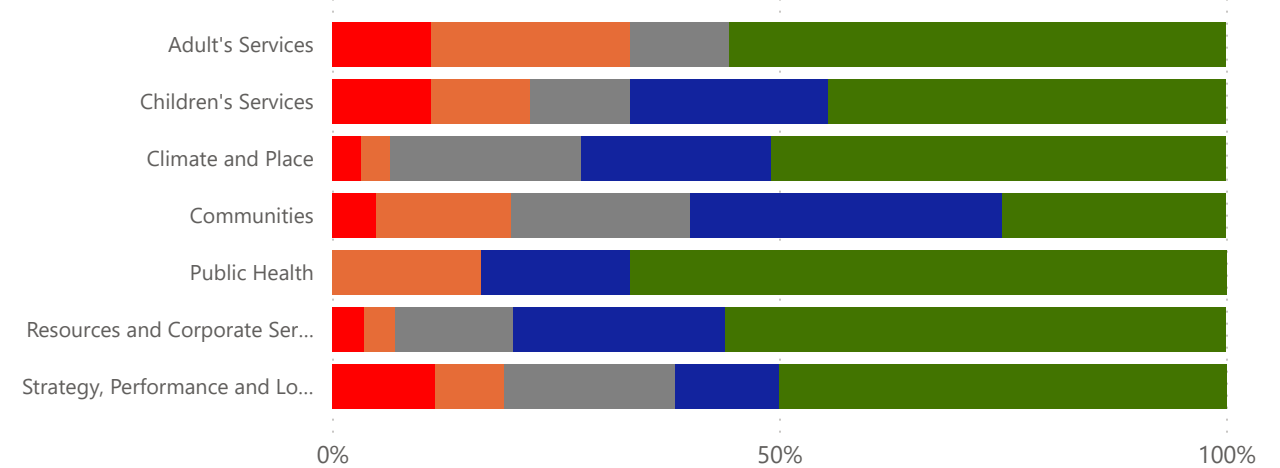
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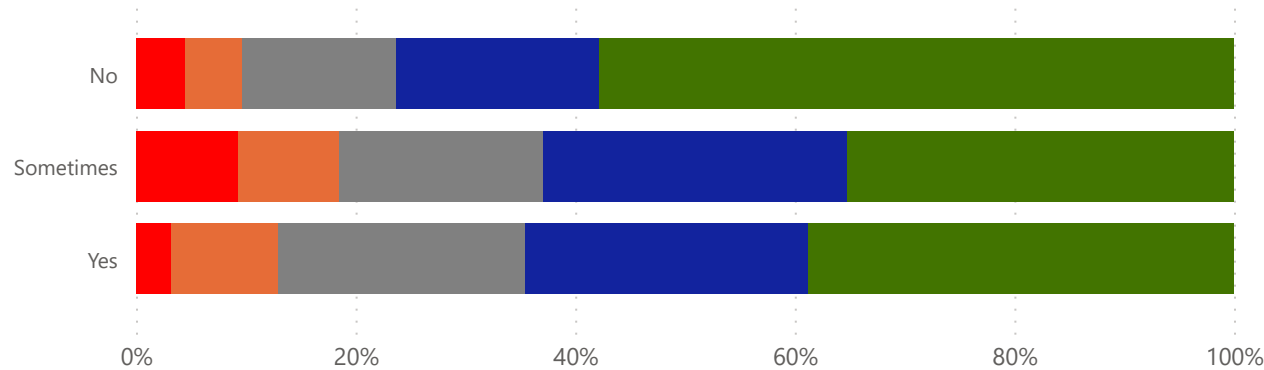
Responses by directorate

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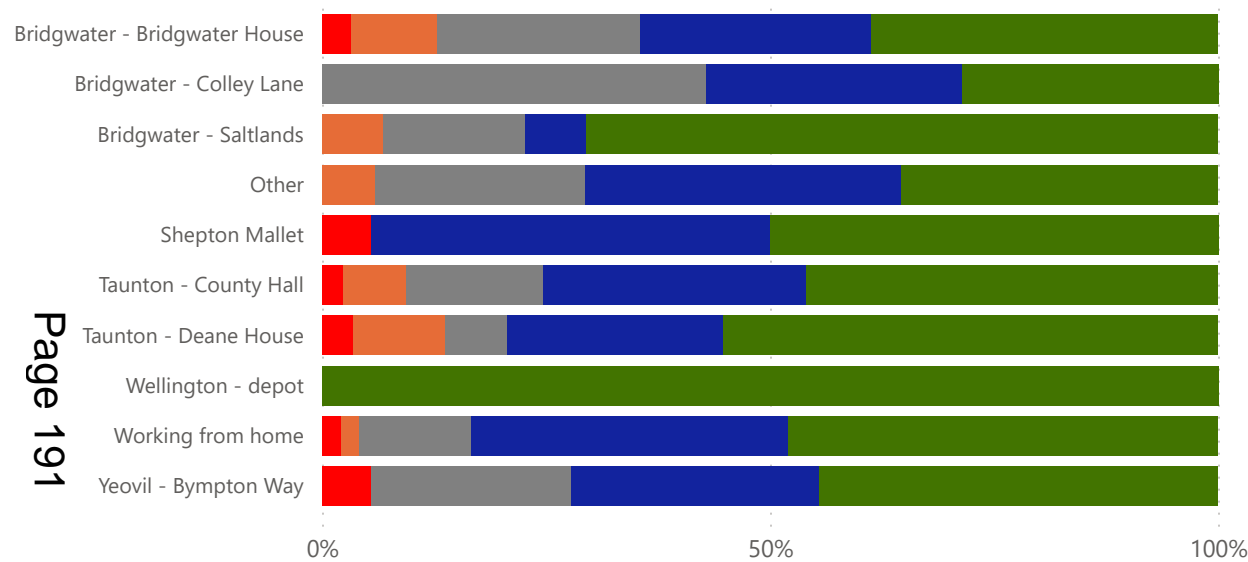
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I feel like Health and Safety is important at Somerset Council

Responses by office location

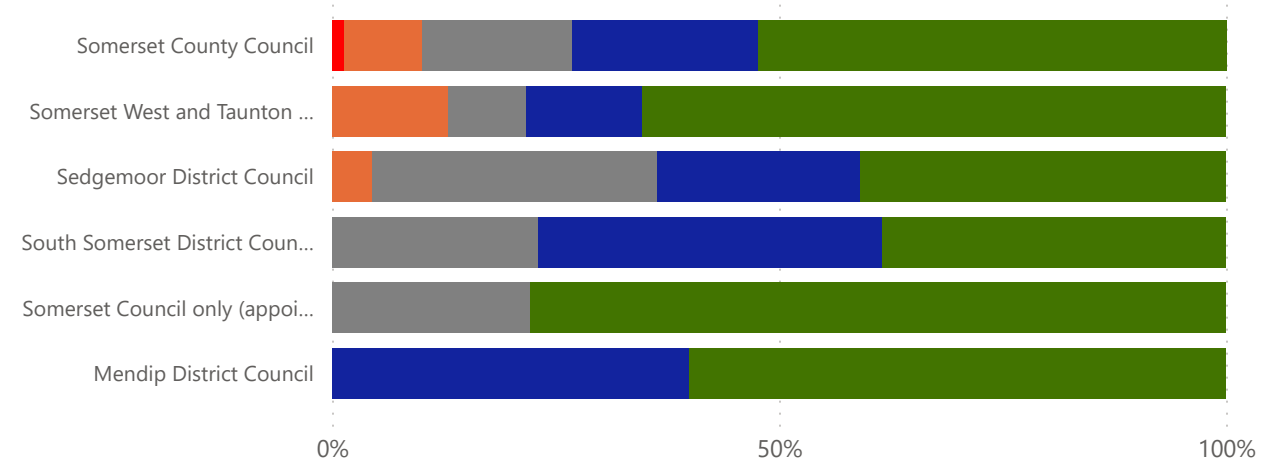
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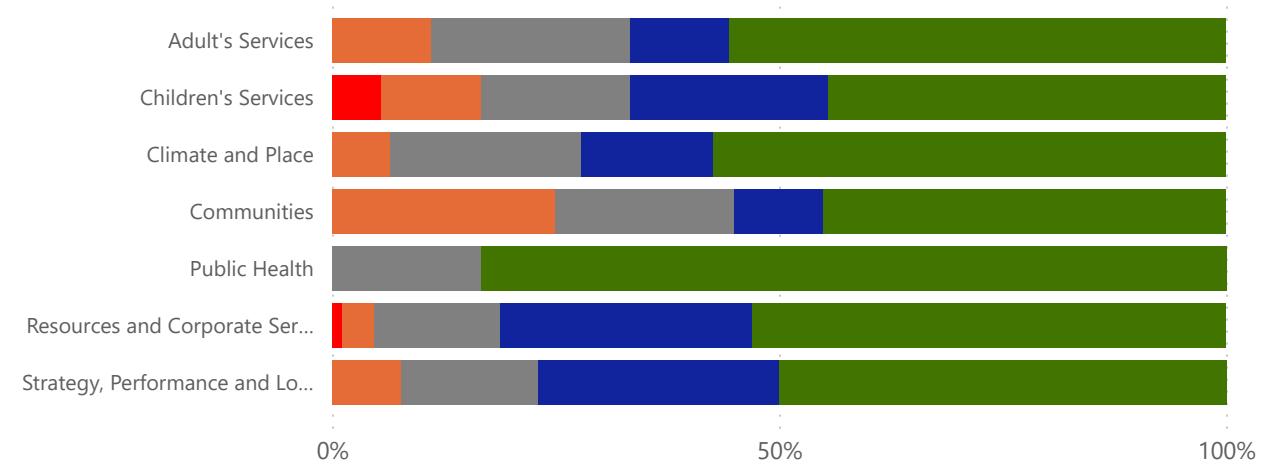
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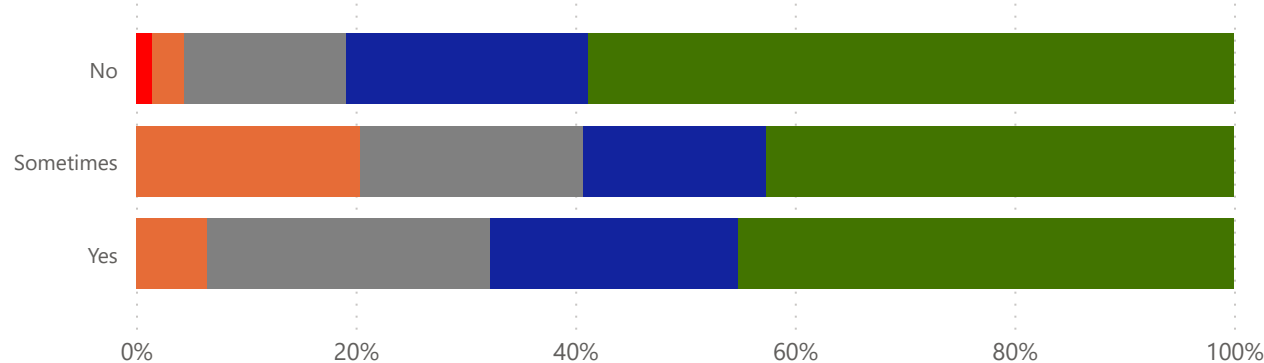
Responses by directorate

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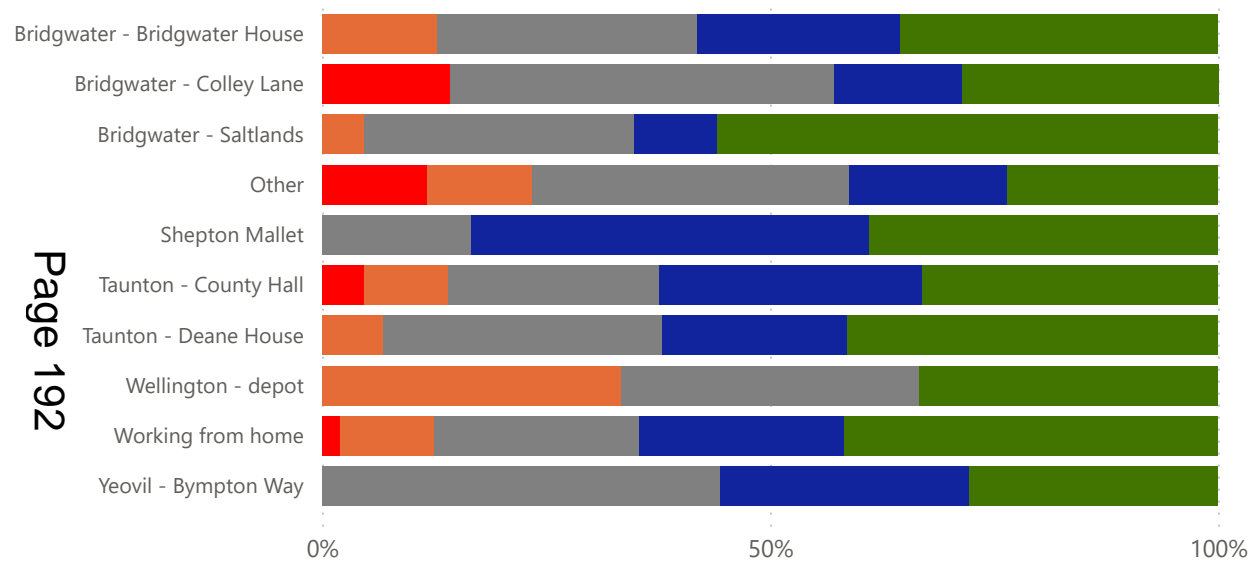
● 1. Disagree ● 2. Slightly Disagree ● 3. Neutral ● 4. Slightly Agree ● 5. Agree



I believe the Council learns from past health and safety incidents

Responses by office location

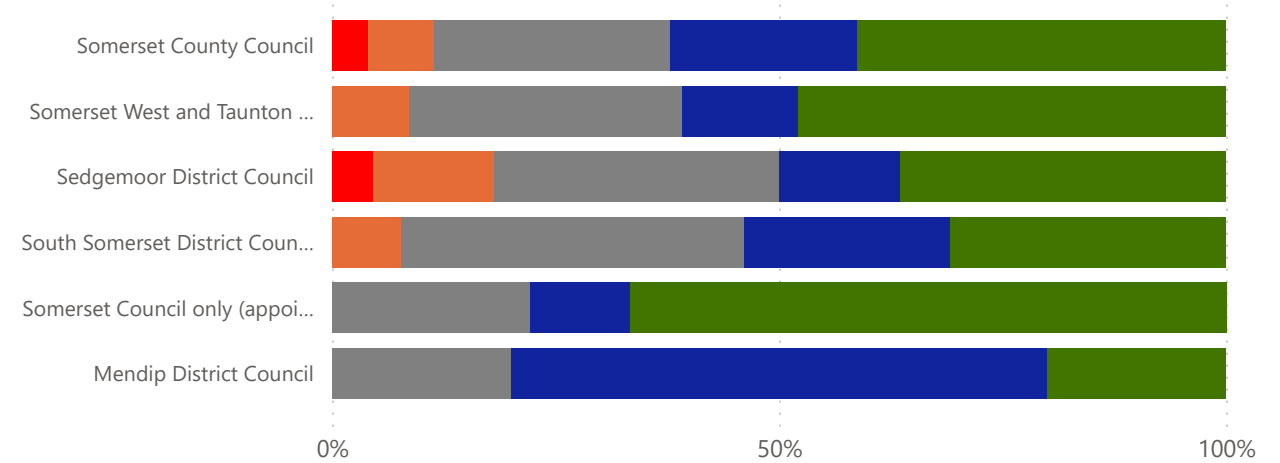
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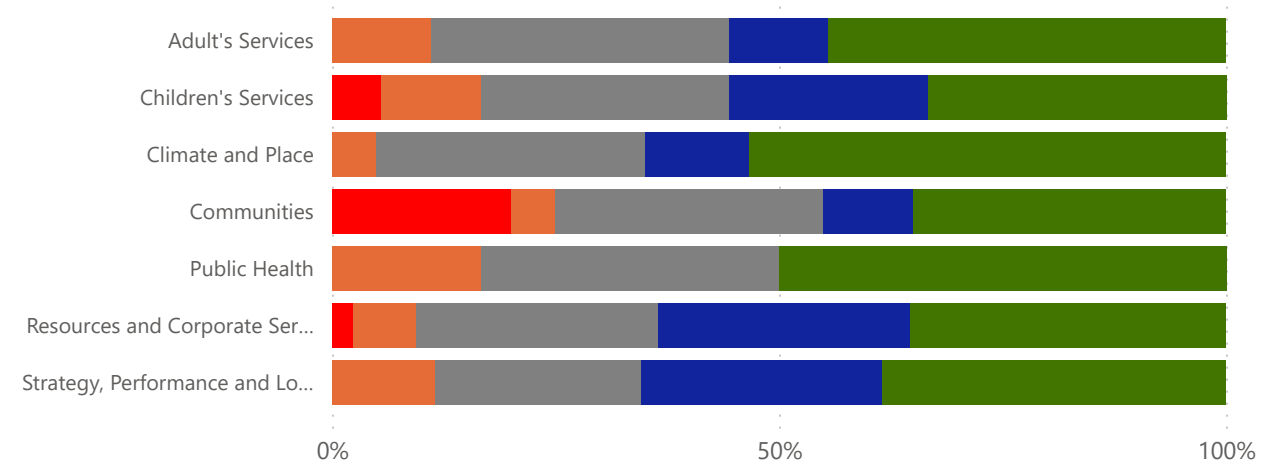
Responses by legacy organisation

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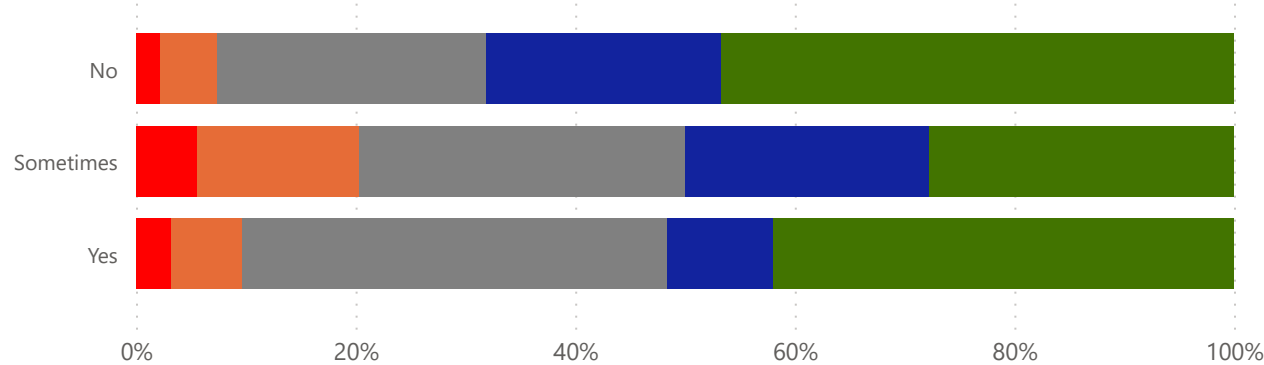
Responses by directorate

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Are you a lone worker?

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Health and Safety Paper for Health, Safety & Wellbeing Steering Group January 2024

*Prepared by
The Corporate Health and Safety Unit*

Service Update

At the previous Steering Group meeting September 2023, the Group were advised of the recruitment exercise to appoint a permanent Strategic Manager for the Health and Safety Service. Following a successful interview, we are pleased to confirm the appointment of Daniel Thomas who had been seconded to the Service Manager post since February 2022.

Regrettably, Senior Officers Francesca Benson and Steve Dorrall both resigned and have since left the authority. In addition, we also said goodbye to admin colleagues Hannah Williams and Jaci Tyler.

Steve had worked for the local authority for 19 years, during that time he has consistently demonstrated exceptional dedication and the highest professional standards. Steve was a well-liked and respected member of the team, and a hugely experienced and knowledgeable health and safety professional, we wish him well in his new role at North Somerset Council.

Prior to the forming of our new council, Francesca quickly established herself as an integral member of the LGR H&S sub-workstream. Francesca had an infectious personality, was always positive and eager to help colleagues in the team and our wider workforce, her wealth of knowledge and experience was an asset to the team, as I am sure it will be for her new employer.

The departure of key personnel resulted in a review of the council's '16, High' Strategic Risk, subsequently the risk was increased to '25, Very High'.

Action has been taken to stabilise the Service and prevent further decline. Following a successful request to the Establishment and Recruitment Control Board, the H&S Service advertised four positions in December.

Pam Price and Ian Haim were appointed into the Senior Safety Officer roles vacated by Steve and Francesca. Charlotte Strang was appointed Safety Officer; a position Pam had been seconded to since January 2022. Finally, Benjamin Smith was appointed Principal Safety Officer, a post which has remained vacant since Jayne Slocombe left the authority in November 2022.

Health and Safety Governance Structure

We are delighted to confirm the council's corporate Health, Safety, and Wellbeing Boards are established and meeting regularly. Since our last report to the Group, we have supported the Community Services Board, and Strategy Workforce, Localities, Resource, and Corporate Services Board in developing Terms of Reference (TOR) for their meetings. Over the coming weeks we will be working to establish TORs for the Climate & Place Board, and Childrens, Adults, and Public Health Board.

Apart from the Children's, Adults and Public Health Board, the Boards have established their membership, attendance from senior managers and Directors is an embedded practice.

The Children's, Adults and Public Health Board met for the first time in November. Unfortunately, attendance was made up of one officer from each Directorate rather than attracting key colleagues from each service that can bring experiences, projects, issues, or concerns to the board to stimulate activity and address issues such as better engagement with the Peoplesafe devices, incident reporting or training requirements for staff (e.g., risk assessment, personal safety, and violence).

Concerns pertaining to the above were raised with Board members who are actively seeking to identify additional members who can represent Adults and Children's.

Under the direction of Alyn Jones, the H&S Service will be defining operating principles for the Boards with ELT to ensure there is a clear understanding within the organisation of how the Boards will be overseen and delivered.

A general reminder, all actions arising from the Board meetings can be viewed on the council's [H&S Governance Bi Report](#).

Health and Safety System

At our last meeting, the H&S Service provided a detailed overview of the contractual arrangements for the two H&S Systems employed by the council and managed by the service.

In our endeavours to implement a singular system across the corporate body, the Health and Safety Service issued a paper to the ICT Project Governance Board in October detailing the three options available. Going into the meeting, we had previously suggested our Service preference would be an in-house solution utilising Microsoft Power Platform technology. In considering the recommendation, ICT enlisted the support of a colleague from Strategy and Performance who completed an independent review.

Consequently, the ICT Project Governance Board reached agreement to pursue the recommendation of an in-house system as the preferred solution. However, the decision to proceed came with a caveat that further discovery work would need to be undertaken to

review the system specification and required functionality to ensure the system could be delivered in accordance with our existing license permissions, thus avoiding additional costs.

Owing to the technical complexities involved, we are proceeding with app design which is aiding our understanding of the system requirements. We have developed and are testing a COSHH Assessment module, a Hazard reporting module is ready for testing, and the accident/incident reporting module is in development.

The discovery work is ongoing; this is a complex project for ICT as they have not previously designed a Power App to replace a system of this size and scope. As such a full and final decision to proceed with the in-house solution has not been agreed, conversations are taking place on a weekly basis, and we are hopeful of reaching a conclusion as soon as possible.

On 11th January ICT appointed a Project Manager which is a further positive indication that the progress made is likely to result in a system built by Somerset Council for Somerset Council.

Core Health and Safety Training

The Health and Safety Service are continuing to liaise with Organisation Development (OD) to agree mandatory 'core' H&S training courses for Somerset Council employees. A draft of the 'Training Paper' discussed at our last meeting is currently being reviewed by Dawn Bettridge.

The Climate and Place (C&P) Board has taken proactive action in volunteering to engage in a pilot exercise which involves adopting the core H&S courses across C&P. We are currently working with OD and Kirsty Larkins to plan a rollout of the courses; an essential part of this work involves setting up the learning profiles to ensure training requirements are correctly assigned and accurate compliance reports can be generated.

Both H&S and OD are extremely grateful to C&P colleagues as the pilot will result in a more efficient wider rollout of mandatory courses across the council. As a reminder, the 'core' mandatory H&S courses are detailed below.

- Fire Safety (all staff)
- Manual Handling (all staff)
- Display Screen Equipment (all staff who have been issued a laptop or desktop device)
- An Introduction to Risk Assessment (all managers)
- Managing Health and Safety (all managers)
- Introduction to Health and Safety (all new starters)
- IOSH Safety for Executives and Directors (Excluded from C&P pilot)

Policy Development

At the HR Committee in October, the following policies were approved.

- Safety Action Notices (Review of legacy SCC policy)
- Confined Spaces (New policy)
- New and Expectant Parents (Review of legacy SCC policy)
- Working Safely at Height (Review of legacy SCC policy)
- Biological Agent, Infection Control and Blood-borne Viruses (Review of legacy SCC policy)
- Water Assets (New policy)
- Working Outside in the Sun and Extremes of Heat and Cold (Review of legacy SCC policy)

We are currently waiting for ICT to publish the policies on our website, once published, comms will be released via Dragon's Pen and the Leadership Briefing. We respectfully ask Board representatives to ensure each Board is made aware of the policies, and managers are instructed to familiarise themselves with requirements of the policies.

In November we consulted members of the Health, Safety and Wellbeing Steering Group and Trade Union representatives at the LGR JNF Group in policy reviews of the Legionella, Slips & Trips, and Food Safety policies. The intention was to present these policies at the January HR Committee. Regrettably, despite following the agreed process, we were unable to obtain policy report sign-off from all the required approvers. Therefore, the policies have been deferred to the next meeting scheduled for 26th March.

Following the recent recruitments and the delays in obtaining policy report sign-off, we have updated our policy review forward plan, linked [here](#).

Display Screen Equipment (DSE) Assessment and Training

We are continuing with our efforts to replace Somerset Council's legacy DSE system. The initial soft launch has shown promise, 65% of employees were able to complete their assessments without DSE assessor intervention. In publishing the DSE Assessment app, we have developed a [Bi Report](#) which is available on our Intranet site.

In January and February, we are delivering training to 70+ DSE Assessor colleagues who will support employees in addressing issues which remain outstanding following completion of the assessment form.

In circumstances where an employee has been unable to self-resolve, a DSE assessor will be assigned to that user. The assessor will then contact them to ask questions, offer advice, and if needed will provide a face-to-face assessment. Broadly speaking, we anticipate colleagues supporting the DSE process would not be asked to travel and therefore would support by following up on cases in the locations where they are based. CHSU officers will follow-up on DSE assessments completed by home workers and cases escalated by DSE assessors outside of the team who are unable to fully solve the user's issues.

Once we have concluded the DSE Assessor engagement, we will release comms via the Leadership Briefing and Dragon's Pen informing colleagues of the changes to the DSE assessment process.

DSE Awareness training is one of the proposed mandatory 'core' H&S courses. We have worked with OD to develop the course which will be incorporated into the Climate and Place training pilot. Although this course will not be considered mandatory until the OD Training Paper is approved, we will promote the benefits of the course to staff when we release comms outlining the new DSE assessment process.

Fire Safety Order Legal Update

The Regulatory Reform (Fire Safety) Order 2005 places strict duties on those who have control of premises to take a robust approach to identifying and managing risks within their buildings. Owing to changes in legislation which came into effect on 1st October 2023, the Health and Safety Service delivered a series of legal updates to inform stakeholders in Strategic Asset Management of the changes.

This training sets out the amendments along with the new articles and the associated actions that are required to prevent unlimited fines for non-compliance under Article 27.

- Articles 9 and 11 – Requirement to record.
- New Article 21A – Information to residents (domestic premises).
- New Article 22 (A1) – Information to other responsible persons (RP).
- New Article 22A – Information to new responsible person.
- New Article 22B – Co-operation with accountable persons.
- Article 27 – Unlimited fines for non-compliance.

Facilities Management (FM) have been provided with a comprehensive checklist that sets out the amendments along with the new articles and the associated actions that are required to prevent unlimited fines for non-compliance under Article 27.

FM are progressing well and have produced a number of template letters and procedures that will be sent out to SC tenants to explain what actions are required. Updates are being shared with the Strategy, Workforce, Localities, Resources, and Corporate Services Board, which in conjunction with the Health and Safety Service are monitoring the progress of this work.

Fire Risk Assessments

Fire risk assessments are being completed on the new Civica Asset Management system following its launch in the summer of 2023.

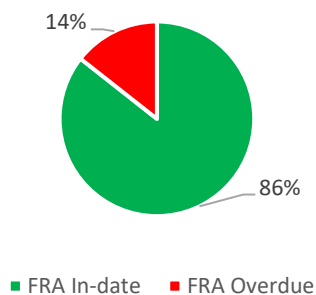
The Health and Safety Service are now responsible for fire risk assessments of 271 premises. This figure accounts for 12 new premises Somerset Council acquired in 2023, along with approximately 45 former district premises.

The September report detailed 91% compliance with our fire risk assessment programme. This figure has since dropped to 86%. 232 premises of our combined corporate and educational estate have in-date fire risk assessments in place, there are a further 39 (25 Corporate & 14 School) premises operating without in date assessments.

Adapting to the new Civica system, adopting additional legacy district premises, and the introduction of the school Core Offer were contributing factors to the drop in our compliance. We had planned to address this prior to the end of the financial year, with January and February being a quieter period. However, the resignations of Steve Dorrall and Francesca meant this was no longer feasible.

Our external fire risk assessor Risk Monitor is being deployed to assist with assessments for the majority of the 39 outstanding sites. We collaborated closely with colleagues from across Strategic Asset Management to consider the feasibility of using alternative suppliers previously employed by the legacy districts. However, in obtaining quotes, Risk Monitor were the most competitive and familiar with our premises.

Overall FRA Completion





Hand Arm Vibration (HAVS) Review.

Due to a RIDDOR report submitted in April 2023, where a member of staff is believed to have suffered from a medical condition associated with the use of vibration emitting equipment, throughout the remainder of 2023, the Health and Safety Service carried out a detailed fact-finding project on hand-arm vibration procedures and practices that are currently used within Somerset Council (SC).

The Health & Safety Service conducted an organisation wide survey to review the use, and risk control measures pertaining to the management of vibration emitting equipment used within the authority. With this data we can identify areas that require support and areas that are showing best practice. It is our aim to standardise our approach to control the hazards presented by vibration emitting equipment.

The project looked at the following processes:

- Occupational health (OH) surveillance.
- Training provided to Staff.
- Current Hand-arm vibration risk assessments.
- SC Hand arm vibration policy (HS036)
- Staff monitoring.
- Equipment magnitude data held by services.
- Equipment vibration testing.
- Equipment servicing and maintenance.

We are in the process of finalising a detailed report which will be issued to relevant Service Directors outlining the information produced by the project as well as actions and recommendations required to achieve compliance with SC [HS036 Hand Arm Vibration Policy](#) and the Health & Safety Executive (HSE) guidance for [Hand-arm vibration - L140 \(hse.gov.uk\)](#).

An essential recommendation arising from the project will be the adoption of a HAVs Power App which has been designed to record and monitor staff vibration exposure. 17 employees have been engaged in testing since October, a total of 20 different tools are being recorded by employees, and we have captured over 250 hours of tool use. The implementation of the app is considered essential to increasing our ability to manage vibration exposure with the authority. Full justification for this recommendation will be included in the report issued to the relevant Service Directors.

People-Safe

We are continuing efforts to align all existing sub-accounts, their management and device users into the new Council organisational structure. The project team has a fortnightly service review meeting with the account manager for Peoplesafe to support the development of this work and provide a direct link for escalating and managing any account, device, or administration issues.

Phase one of the Peoplesafe project was initiated in the summer last year, ahead of the contract extension renewal in September 2023. This involved an audit of all devices already in the business to determine if they were still required, if they were missing, and identify any outstanding orders not fulfilled. This work was completed September 2023. Some post-audit actions were identified including return of unwanted devices and coordinating replacement of missing devices, and this work was also completed.

Phase two of the Peoplesafe project is underway, with several key priorities:

1. Design and implement a clear and manageable process to deal with the administration of Lone Worker Devices.

A priority for the autumn was to create a new process in-house for teams to request new devices, return devices, report missing devices. This work has been completed with new MS forms created as well as a dedicated [intranet page](#) for lone worker devices as a hub with information for both users and sub-account managers, administrators e.g. FAQs, training links, forms, guidance documents.

2. Develop and implement a framework for the restructure of sub-accounts and management.

The sub-accounts are currently structured on the Peoplesafe portal as per legacy Council areas and organisational team structures. This needs to be restructured to reflect the new organisational structure e.g., directorates, services and sub-accounts aligned to the business area under each of these.

Each sub-account needs to be reviewed by the appropriate manager to ensure that the device user information is up to date, notifying the CHSU of any changes or inaccuracies. The project team is working with sub-account managers (where known) to start making these changes, however, as previously reported, the audit identified some big gaps in sub-account management and administration personnel, identifying sub-account managers and administrators is a priority piece of work. This is not only required in being able to progress the restructure of sub-account landscape, and to ensure that all device users have clear lines of reporting any device issues and personal data changes within their business areas, but also to ensure that the team composition of users within sub-accounts, and the team escalation details for any alerts, is reviewed, refreshed, and kept up to date.

Work has been underway to identify personnel to fill these gaps however the ongoing and delayed restructure of the organisation has made this work more challenging to progress. An email was therefore sent to all Directors with service device users in late



November escalating the urgency of this work and asking them to identify named individuals to be the responsible sub-account managers, and who the CHSU can work with in restructuring the sub-accounts. The project team has created an outline of the key responsibilities of sub-account managers / administrators along with a sway presentation to highlight key considerations for action in the review of their sub-accounts to support the restructure work.

3. Migrate all existing portal data to new Peoplesafe Portal.

There is an additional timebound driver for securing sub-account managers and re-structure which comes from Peoplesafe direct. Peoplesafe has informed the council of the need to migrate our account onto a new online portal as of 12th February 2024.

A critical requirement pre data migration is that the sub-account landscape must be confirmed for bulk upload along with named sub-account managers and updated team escalation details.

4. Agree and implement a standardised device unit configuration setting for all devices.

The legacy Councils had differing configuration settings for devices, which in practice meant some devices had slightly different functionality with action buttons and features applied. The project team has recently agreed the configuration settings for all devices be applied as a standardised setting, and this will take effect by the beginning of February, if not earlier. This will not have significant changes for device users and will give the majority improved provision with their device functionality. Changes will be communicated to all sub-account managers and users in advance.

5. Design and implement a training plan to increase device usage and support sub-account managers/administrators.

Usage rates for devices remains low, which is unacceptable given it is allocated based on identified need as part of PPE. Data from the Peoplesafe portal on 03/01/2024 showed that of the 1274 users registered on the system, only 166 were active users (with recorded activity) and 885 were dormant (this means no recorded activity in a 3-month period). 223 were inactive (not linked to a device) which could mean that user profiles exist on the portal for staff that no longer require devices or have left the organisation – this data needs to be reviewed and updated asap.

The low device usage rates, and feedback from some sub-account managers that users would benefit from device operation training, reinforces the importance of scheduling refresher training. It is envisaged this will be delivered by both Peoplesafe (initially in the form of 1 or 2 drop-in sessions) and further supported by the CHSU team with follow up virtual sessions. The CHSU team is small, and face-to-face training is too ambitious to roll out given the limited resources. The virtual training sessions will therefore be designed as interactive sessions and encourage device users to bring devices to the session with them.

The project team is also mindful that with new sub-account managers/administrations some time also needs to be allocated to onboard those personnel, but with a new portal about to go live, this may be better scheduled for after the new portal is in place. In the

meantime, there is e-learning available in the form of Peoplesafe guidance videos and PDFs for all users and sub-account managers to review relating to the existing portal, with device operating guidance and portal administration information.

Internal and External Enforcements

There has been no enforcement action taken by either the Health and Safety Executive (HSE) or the Devon & Somerset Fire and Rescue Service (DSFRS) against the council or any of its Maintained Schools.

Corporately, the Health and Safety Service has not issued any Safety Action Notices.

Following findings of H&S audits and/or Fire Risk Assessments, the following schools are currently on the education escalation procedure.

- Rode & Norton St Phillip (Direction Level 2)

Health and Safety Activity Report

From April 2023 – December 2023 the Health and Safety Service has:

- Undertaken 81 Audits/Inspections.
- Completed 34 Fire Risk Assessments.
- Delivered 88 Training courses to 652 employees.
- Published 79 Communications via comms channels such as Schools newsletter, Dragon's Pen, Leadership Briefing, and the H&S Intranet site.

Wellbeing Update SC

Support requests coming into the Working Well Mailbox are very low, this may change as restructures are announced, but could also be due to individuals seeking support externally. The Wellbeing team will focus future comms on the impartiality and confidentiality of the service and encourage managers to ensure that they have made their teams aware of what support is available.

The new roles of Working Well Advocate and Mental Health Peer Supporter have now launched, any similar voluntary roles from our predecessor organisations have now ended.

The launch article with the role spec and sign-up document for the Working Well Advocates is below. Take-up is low although it is early days for this to be successful it is important that the advocates represent a wide range of service areas.

[Working Well Advocates \(sharepoint.com\)](#)

The Mental Health Peer Supporters have been recruited from our pre-existing volunteers and will be those who take the support requests from the Working Well mailbox the role specification can be seen by following the link below.

[HR & OD - Mental Health Peer Supporter .pdf - All Documents \(sharepoint.com\)](#)

Wellbeing and equalities training continues for employees without access to IT we have delivered to nearly all staff in Transporting Somerset and will be moving on to other teams this year.

Employees without access to IT because they were not issued with a device when they joined the organisation can now request an SC email account through their managers, this is processed via Halo. This will allow them access to comms, policy information, employee support networks, the wellbeing site, and staff benefits information. They can do this via their personal mobile phone, home computer or a library computer. If their account is inactive for three months, then access will be reviewed to ensure that budgets are being managed effectively for this.

Feedback from the Working Well Advocates from their last monthly meeting

- Comms around wellbeing from SLT sounds insincere because it is often copied and pasted from previous comms or put at the bottom of messaging as an afterthought.
- People are in shock, there is an information void, management and senior management do not have answers even if you do go to them, you cannot function unless you distance yourself from it.
- Managers are feeling anxious themselves.
- Having weekly informal meetings and keeping conversation open can help prevent relationships from breaking down. Toxic conversations and mistruth need to be challenged.
- Some teams are able to do more partnership working since we have come together and are enjoying working with new people and supporting teams who had been previously overstretched.
- Advocates are happy to reach out and check in with those who may be isolated or struggling even if they are not in their direct team, we spoke about increasing their visibility to allow for this.

Corporate and Education Accidents and Incidents

To be presented by Pam Price at the meeting.

Daniel Thomas

Health and Safety Strategic Manager

15th January 2024

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HR Committee work plan

26 March 2024 – 14:00 – Shepton Mallet Council Office Asham Room, Cannards Grave Road, Shepton Mallet, BA4 5BT

9 July 2024

Health & Safety policies

HR policies

Committee Workplan

8 October 2024

Health & Safety policies

HR policies

Committee Workplan

14 January 2025

Health & Safety policies

HR policies

Committee Workplan

8 April 2025

Health & Safety policies

HR policies

Committee Workplan

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