

2022/2023





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1. Executive Summary

Be transparent, open, and accessible.

This report provides an overview of the health, safety, and welfare performance achievements in the Service from 1st April 2022 to 31st March 2023.

The report will be provided to members of the Health Safety and Welfare Strategy Group (HSWSG), Service Leadership Team (SLT) and Essex Police, Fire and Crime Commissioner Fire and Rescue Authority. It will also be available electronically on the Service intranet for all colleagues.

Our Service seeks continuous improvement in all aspects of safety by promoting a positive safety culture, identifying, and mitigating risk and ensuring personal competence. The Service strives to keep all colleagues and the County of Essex safe, while delivering against the Service strategy by providing a wide range of essential services to the community. Performance is constantly monitored and measured against agreed standards to demonstrate good practice and show where improvement is needed.

2. Statistical Analysis

Be transparent, open, and accessible. Promote a positive culture in the workplace.

The Health and Safety department carries out active self-monitoring and reactive monitoring to ensure that key risks are controlled, and that performance standards and risk assessments are used and monitored.

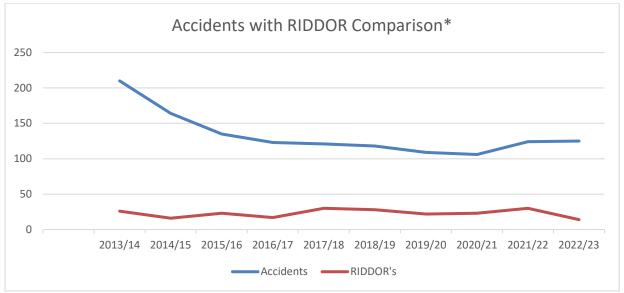
Health and Safety Advisors monitor safety events on the Health and Safety Management System (HSMS) known as 'OSHENS' until 9th January 2023 when it was replaced with a new system 'Assure'. Data within the system is used to identify trends and issues and record remedial actions taken. Risk assessment reviews are initiated when hazards are reported or following safety events where there are learning outcomes from investigations which require risk assessments to be re-assessed to mitigate risks to as low as is reasonably practicable.

2.1 The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

RIDDOR place duties on employers, and their nominated 'Responsible Person' for health and safety to report certain serious workplace accidents, occupational diseases and specified dangerous occurrences (near misses).

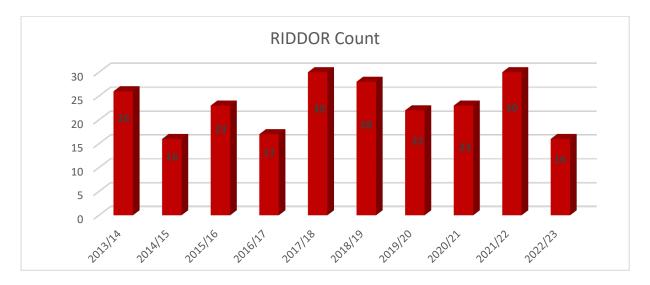
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^{*}This is the total number of accidents from all groups of staff across our Service.

Although a variant of one more accident than last year, the general trend continues to see a steady reduction in accidents from 210 in 2013/14 down to 125 in 2022/23 (a long-term reduction of 40%). Over the reporting period RIDDOR incidents have been relatively consistent with minor fluctuations year on year. This year however showed a significant reduction of 47% in comparison to 2021/22 and back down to 16 our lowest recorded in 2014/15.



The 16 RIDDORs reported in 2022/23 consist of:

- 2 specified injures 1 broken wrist when a FF tripped over the straps of his leggings (routine activity) and 1 broken bone in foot when a FF used the pole drop on station (responding)
- 3 members of public 1 Vet attending animal rescue received a broken ankle, 1 child hit on the head with a mini golf club at station open day and 1 member of the public as passenger in car involved in a collision with appliance on blue lights, resulting in a broken collar bone
- 11 injuries exceeding 7 days (see section 2.3 for further detail of RIDDOR's in red)

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- > 1 at an operational incident
- > 3 during operational training
- ➤ 1 participating in recreational sport (table tennis)
- 6 during routine activities

2.2 Five Year (medium term) Comparison

	2018/19	2019/20	2020/21	2021/22	2022/23
Accidents	118	109	106	124	125
Attacks on FSP	19	18	16	18	13
RIDDOR Count	28	22	23	30	16

The table above shows the COVID-19 pandemic resulted in a slight reduction in accidents to the norm, which is consistent with less activity during the same period. Attacks on Fire Service personnel (FSP) remain steady and are mainly verbal abuse. RIDDOR reports also reduced during the pandemic and returned to pre COVID-19 levels in 2021/22 with the majority being over 7-day injuries. This year RIDDOR reports reduced over the 5-year period by 43% and a 46% reduction from 2021/22 to 2022/23.

OUR GOALS

- Protect people, assets, and the communities in which we work
- Provide and maintain safe plant, equipment, and safe systems of work
- Always apply good practice and recognise that compliance with standards and legislation is a minimum level requirement that must be continually improved upon
- To control workplace hazards by assessing risks and establishing suitable control measures
- Drive a system of open communication and a no-blame culture on safety that fosters strong employee and employer co-operation
- Communicate lessons learnt and share good practice throughout our Service



2.3 Home Office Data 2022/23 Operational Personnel/Injuries

HOME OFFICE DATA 2022/23	Number of Persons Injured	Number of Over 7 Day Injuries	Number of RIDDOR Specified Injuries	Number of Fatalities	TOTAL
Injuries at Fires	23	2	0	0	25
Injuries at Road Traffic Collisions	1	0	0	0	1
Injuries at Special Service Incidents	11	1	0	0	12
Injuries During Operational Training	31	4	0	0	35
Injuries During Fitness Training	4	1	0	0	5
Injuries During Routine Activities	23	6	2	0	31
TOTAL	93	14	2	0	

2.3.1 Injuries During Operational Incidents

During 2022/23 we attended 15,903 incidents against 15,420 the previous year. The number of injuries at Operational incidents reduced from 34 in 2021/22 to 24 2022/23. RIDDOR reportable incidents related to operational incidents also reduced from 8 last year to 2 this year.

Injuries resulting in lost shifts were (RIDDOR reportable incidents in red):

- 1. FF felt 'pop' on back of hand restowing equipment resulting in 5 shifts lost
- 2. FF felt unwell at operational incident resulting in 2 shifts lost
- 3. FF jarred back running out hose resulting in 2 shifts lost
- 4. FF rolled ankle dismounting appliance resulting in 7 shifts lost
- 5. FF injured foot in field fire resulting in 22 shifts lost
- 6. FF suffered sore throat at chemical incident resulting in 3 shifts lost
- 7. FF suffered smoke inhalation at field fire resulting in 1 shift lost

2.3.2 Injuries During Operational Training

In 2022/23 there were 31 injuries during operational training. This is a decrease from 2021/22 when there were 40 reported. There has also been a decrease in RIDDOR reportable injuries relating to operational training, from 7 in 2021/22 to 4 during 2022/23. Shifts lost for this category also decreased from 213 in 2021/22 to 150 during 2022/23 even though one of the injuries alone accounts for 99 lost shifts. Below in red is a summary of the RIDDOR reportable injuries:

1. FF felt pain in his shoulder whilst extending the 13.5m ladder resulting in an over 7-day injury and 99 shifts lost

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- 2. FF pinched his finger under a steel roller being used to move a concrete slab during lifting and moving exercise resulting in an over 7-day injury and 16 shifts lost
- 3. FF experienced lower back pain whilst dragging a BA dummy in preparation for a training session resulting in an over 7-day injury and 9 shifts lost
- 4. FF felt pain in lower back whilst lifting an exercise casualty during a BADA exercise resulting in an over 7-day injury and 21 shifts lost

2.3.3 Injuries During Fitness Training

Data for injuries sustained while taking part in fitness training remained the same as last year with 4 incidents reported. One of these resulted in an over 7 day injury and therefore was RIDDOR reportable (in red below). Below is further information relating to the specific injuries:

- 1. FF injured lower leg playing table tennis resulting in an over 7-day injury and 180 shifts lost
- 2. FF twisted ankle during organised circuit training in drill yard
- 3. FF injured thumb taking part in organised circuit training in drill yard
- 4. FF grazed shins falling from treadmill

2.3.4 Injuries during Routine Activities

Injuries sustained during routine activites have increased slightly from 20 during 2021/22 to 24 during 2022/23. There was also an increase in reportable RIDDORs relating to routine activities from 6 to 8 over the same period. Shifts lost this year were 186 compared to 133 in the previous reporting period. However, one absence was over 90 days contributing to the higher figure recorded. There were no notable trends highlighted. The incidents were made up as follows:-

- 1. Burn whist using station kitchen x 1
- 2. Feeling unwell and taken to hospital x 2
- 3. Bumped into or hit something stationery x 4
- 4. Manual handing x 3
- 5. Trapped finger x 1
- 6. Slip/trip/fall x 13

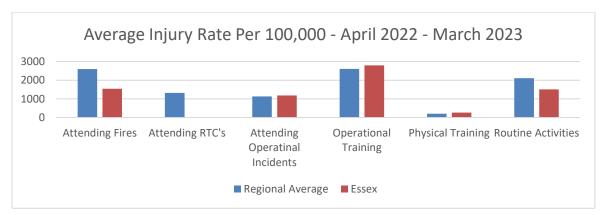
2.3.5 Regional Comparison

To support the development of health and safety across Fire Services in the Eastern Region and London a forum for the seven Fire and Rescue Services was created to engage on a strategic and tactical level of health and safety management. Partner agencies, subgroups and working groups come together as required to ensure of an appropriate response to health and safety matters.

The Eastern Region and London Health and Safety Group also provides representation at the National Fire Chiefs Council (NFCC) National Health and Safety Committee.

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The graph above shows our Service's performance against the regional average through data that is collated quarterly and presented as per 100,000 to bring all Service data into alignment. This data is compared and discussed at the Eastern Region and London Health and Safety Group for trend analysis and sharing of notable practices.

Although the average injury rate for Essex is slightly higher against the regional average for 'Attending Operational Training' (7% higher), 'Attending Operational Incidents' (5% higher), and 'Physical Training' (26% higher); there were significantly less injuries against the regional average for 'Routine Activities' (28% less), 'Attending Fires' (40% less) and Essex had zero injuries attending RTC's compared to the regional average of 1318 per 100,000.

2.3.6 Road Traffic Collisions (RTC)

The chart below shows a comparison in the number of RTC incidents reported in the last two years.

2021/22		2022/23		
71	71 Forwards Operational			
16	Reversing / turning Operational	16		
10	Forwards on station	8		
1	Reversing on station	7		
9	Third party at fault	2		
11	Stationery / vehicle unattended / stone chip	20		
5	Other	2		
123	TOTAL	126		

A number of toolbox talks have been released to address the increase in incidents. The Health and Safety team will monitor future incidents as we anticipate seeing a reduction in RTC incidents over the coming year.

- TBT No 45 Appropriate Footwear for Driving Appliances
- TBT No 50 Changes to the Highway Code
- TBT No 53 Emergency Response Driving Speeds
- TBT No 64 Mobile Phones and Driving

The Occupational Road Risk Group meet quarterly and has initiated various work streams to reduce RTC reports within the Service. These include:-

Investigating the use of reversing cameras instead of door mirrors for new appliances

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- Reduce the time frame for emergency response driving (ERD) refresher courses
- Carry out ERD refresher at drivers own stations to address local hazards
- Refresh video for Banks Person training and deliver the information with communications regarding the expectation for both Banks Person and Driver through The Shout and pdrPro

OUR COMMITMENTS

- Create a non-judgemental environment where our colleagues can be open and willing to share something that with hindsight they could have done better. This enables us to learn and reduce the likelihood of a similar occurrence or accident being repeated
- Assign health and safety risks the same priority as other critical organisational activities
- Provide a healthy working environment and appropriate facilities for the welfare of all colleagues
- Provide a strong safety management framework that sets and reviews safety objectives and targets
- Motivate and drive commitment of all colleagues by providing health, safety and welfare awareness training
- Use, handle, store and transport articles and substances safely
- To ensure continual improvement, all colleagues are reminded of their responsibility: colleagues have an obligation to take reasonable care of their own safety and the safety of others who may be affected by their activities
- When safety events occur, we will engage with colleagues to reinforce safety messages and procedures to mitigate the likelihood of risk
- Provide an annual report on health and safety statistics and trends to enable us to continually seek to improve on performance

3. Current Resourcing

Make best use of resources. Promote a positive culture in the workplace.

Line management of the Health and Safety department sits with the Deputy Chief Fire Officer who maintains governance via the Health, Safety and Welfare Strategy Group.

The Head of Health and Safety, and designated "Competent Person," is a Chartered Member of the Institution of Occupational Safety and Health (IOSH), and a registered consultant on the Occupational Safety and Health Consultants Register endorsed by the HSE.

Over the last year, there has been a continual emphasis in expanding the core skills of the Health and Safety team to facilitate internal training courses and to enable them to continue to carry out their roles competently.

Our Service acknowledges the right of colleagues to nominate health and safety representatives and aspires to consult and communicate with all trade union representatives, and colleagues, in good time. Currently our Service engages in consultation, and values all contributions from the following trade union health and safety representatives:

Fire Officers Association (FOA), Fire and Rescue Services Association (FRSA), Fire Brigades Union (FBU), Unison.



Health and Safety Department Structure

Deputy Chief Fire Officer

Without absolving the Police, Fire and crime Commissioner Fire and Rescue Authority, or the Chief Fire Officer of their legal obligations as an employer with regard to health and safety, the Deputy Chief Fire Officer assumes day-to-day responsibility for the discharge of the authority's legal obligations to health and safety.

Assistant Director Risk and Assurance

Designated 'Competent Person' in accordance with requirements under the Management of Health and Safety at Work Regulations 1999.

The Area Manager: Response Policy, Operational Assurance, Service Control and Health and Safety, has the responsibility for managing the activities (planning, development, and implementation) of each of the functions comprising of the Health and Safety and Operational Assurance departments.

Senior Health and Safety Advisor

The Senior Health and Safety Advisor is responsible for the day-to-day management of the Health and Safety Advisors, supports the Head of Health and Safety in design and implementation of policies and procedures. Advises Service management on health and safety legislation/policy and deputises for the HSM.

FBU Health, Safety and Welfare Coordinator

Seconded safety representative for consultation and assisting the Head of Health and Safety in design and implementation of policies and procedures. 6 Command Reps

31 Station Reps

Risk Assessment Officer

The Risk Assessment
Officer assists the Head
of Health and Safety in
the planning,
development and
implementation of
Service health and
safety policies, and is
responsible for the
management of the risk
assessment systems
and procedures.

Health and Safety Advisor

Northwest & Southwest

Functional and geographical responsibility to support station managers. Advises Service management on health and safety legislation/policy change and implementation. Has technical expertise to support local managers in achieving safety goals.

Health and Safety Admin Assistant

The Health and Safety
Administration Assistant
is responsible for
managing the safety
event electronic
reporting system.
Reviewing and
monitoring progress of
all accident
investigation
documentation as well
as general Health and
Safety department
administration.

Health and Safety Advisor

Northeast & Southeast

Functional and geographical responsibility to support station managers. Advises Service management on health and safety legislation/policy change and implementation. Has technical expertise to support local managers in achieving safety goals.



4. 2022/23 Department Achievements

Promote a positive culture in the workplace. Develop and broaden roles and range of activities undertaken by the Service. Be transparent, open, and accessible. Collaborate with our partners. Make best use of our resources.

In 2022/23, the Health and Safety department have issued numerous communications summarised below:

4.1 - 3 Safety Flashes were created to identify urgent safety messages:

SF26	High Consequence Infectious Diseases (HCID)	
SF04A	Changes in Road Surface Conditions	
SF 27	Illicit Drug and Alcohol Manufacture	

<u>4.2 - 8 Toolbox Talks were created to inform operational crews of updated health and safety information:</u>

TDT 52	Emergency December Driving Speeds	
TBT 53	Emergency Response Driving Speeds	
TBT 54	Holmatro Spreader Tool	
TBT 19a	Sundstrom SR 100 Half Mask	
TBT 55	Animal Rescue Response Levels	
TBT 56	Don't be the Crash Test Dummy, Wear Your Seatbelt	
TBT 57	Operational Personnel Off the Run (OTR) Due to Fitness	
TBT 58	Hose Reel Failures	
TBT 59	Clockwise Opening Fire Hydrants	

4.3 The following departmental policies were reviewed in the last 12 months:

Policies	Date Reviewed
The Service Arrangements for the Control of Substances Hazardous to Health (COSHH) Regulations	May 2022
Service Arrangements for Safety Representatives, Safety Committees and the Health and Safety (Consultation with Employees) 1996	May 2022
Service Arrangements for the Health and Safety (First Aid) Regulations 1981	July 2022
Accident Investigation Policy	Oct 2022
Health and Safety Guidance for Safety Event Reporting	Jan 2023
Service Arrangements for the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)	Jan 2023
Managing Occupational Road Risk	Jan 2023



5.Case Study 1 – Replacement of the Health and Safety Management System



Using a suitable Health and Safety Management System (HSMS) allows the Service to monitor, audit and review safety events in line with Managing for Health & Safety (HSG65) to meet our statutory requirements.

A new HSMS was required to meet our current and future needs as OSHENS was expected to be phased out by the provider over the next three years.

ECFRS first commissioned OSHENS in 2008 to take over from a paper-based system. At the time, this introduced significant improvements. However, with technological advancements, new systems provide more opportunities to communicate with other organisational applications, interrogate data more efficiently with flexibility to make local changes to templates and structures.

Failure to have a suitable HSMS to monitor safety events (proactive and reactive) can increase the likelihood of safety events in the workplace, with the potential of causing harm to employees, visitors and members of the public who may be affected by our work activities. Subsequently, this can have financial implications to the Service through litigation, damage to assets, lost working time and damage to our reputation.

The objectives of the project were:

- To secure funding to source a replacement HSMS
- Procure and implement a solution to effectively manage health and safety throughout the Service, combining a recording system for legislative compliance
- Introduce an effective method of reporting against health and safety
- Review and redefine the health and safety management processes
- Integrate the solution with the existing Civica HR & Payroll solution
- Migrate open and ongoing records to the solution from our legacy system, OSHENS
- Decommission the existing OSHENS solution, whilst retaining accessible historical records, within the parameters of our retention policy

With the support of the Procurement Department, we undertook a G-Cloud review and evaluation process, including demonstrations of three shortlisted companies. Following the appropriate assessments, G-Cloud guidance, and weighting evaluations, we identified a suitable solution to replace OSHENS with the Assure system provided by Evotix.

The Health and Safety team were key stakeholders, involved in the configuration of the Assure system. The system is also configurable locally allowing the Service to remain up to date and in line with current legislation. Training was rolled out to managers who then cascaded to their respective teams, and workshops were held for anyone needing additional assistance using the system. Training assistance and instructions were also uploaded to learnPro and pdrPro.

The new Assure system successfully went live on 9th January 2023 with OSHENS decommissioned on 31st January 2023.



6. Case Study 2 - No Time to Lose Campaign

The IOSH No Time to Lose campaign was launched in 2014 to get carcinogenic exposure issues more widely understood and help businesses take action. The Service joined the campaign in 2017 and created a pledge committing to do the following: -



- Assess whether work activities that form part of our business have the potential to cause occupational cancer
- Develop and deliver a prevention strategy that's reflects the risks of developing occupational cancer in our workplace
- Ensure senior and operational managers understand the relevant occupational cancer risks and manage them proactively as a significant health issue
- Ensure our employees use the preventative measures in place properly and consistently, and check that our preventative measures are working
- Demand the same standards of our supply chain as we do of ourselves
- Include our protective measures against occupational cancer risks in our annual report or other public reporting format

A No Time to Lose group meets quarterly and is chaired by the Health and Safety Manager with attendance of managers from Technical Services, Fleet Workshops, Operational Training, Operations, Operational Assurance, Occupational Health, BA Training, Property Services, Technical Fire Safety and Trade Union Representatives.

The focus of the group is to focus on raising awareness and promoting action to prevent occupational cancer caused by exposure to hazardous substances in the workplace. The campaign aims to provide resources, guidance, and support to employees to address and mitigate the risks associated with occupational cancer.

This year the International Agency for Research on Cancer (IARC), the cancer agency of the World Health Organization (WHO), has evaluated the carcinogenicity of occupational exposure as a firefighter. The IARC report showed positive associations observed for mesothelioma and cancers of the bladder, colon, prostate, and testis, and for melanoma and non-hodgkin lymphoma. As a result, it was announced on 1st July 2022 that occupational exposure as a firefighter is classified as "carcinogenic to humans" on the basis of "sufficient" evidence for cancer in humans (Class 1). This classification can be applied to all types of firefighters, and to both men and women.

Following the release of this report, a sub-group of the No Time to Lose group was commissioned to meet more frequently with the intention to increase the rate of changes, to mitigate the risk of carcinogenic exposure in our workplace and at operational incidents. The Protecting our People Board is a task and finish project that will meet frequently with key stakeholders and Rep bodies to ensure our current procedures and PPE continues to be the best we can provide to protect our workforce. The group will provide short, medium and long term objectives that we would want to deliver.



7. Case Study 3 – Playing of Volleyball Workplace Review

After identifying an increasing trend in safety events and absence data related to volleyball injuries, the Health and Safety team initiated a review of the workplace volleyball playing areas, equipment, and risk assessments. It was identified that not all workplaces are suitable for playing volleyball.

Since 2018 we have had 10 reports of injuries received whilst playing volleyball which resulted in a total of 366 shifts lost. The review also identified that staff were 14 times more likely to suffer an injury playing volleyball than using the treadmill, and any absence from volleyball was more likely to exceed 5 shifts. Staff were also 3 times more likely to be injured playing volleyball than any other sport.

Physical training activities are an important part of maintaining firefighter fitness and can contribute to both physical and mental wellbeing. However, this should always be conducted in as safe a manner as possible to avoid injury and absence.

Station Managers were asked to forward an expression of interest for any locations wishing to continue playing volleyball. Once received, the Health and Safety department visited the 10 locations that were identified to review local workplace risk assessments for volleyball. New control measures were identified with an action plan that will reduce the risks for each location before volleyball is reinstated at these locations.

This initiative has now contributed to the reduction in injuries to staff whilst playing volleyball and we have seen just one incident reported during 2022/23 compared to four in 2021/22.

Members of the Health and Safety team plan to re visit the 10 locations in the coming months to check all control measures are still in place and that staff playing volleyball can do so safely.





8.2021/22 Health and Safety Department Objectives Review

Promote a positive culture in the workplace. Develop and broaden roles and range of activities undertaken by the Service. Be transparent, open, and accessible. Collaborate with our partners. Make best use of our resources.

Objective review updates in green text show tasks completed in 2022/23. Updates in blue text are rescheduled to 2023/24.

- Implement a Service wide training package for 'Assure' prior to implementation
 - Service wide training was carried out and additional training materials are available on learnPro and pdrPro



- Implement the new HSMS 'Assure'
 - > The new system Assure has been successfully implemented and is now live
- Engage in new Service wide Health and Safety Roadshow to familiarise crews with new HSMS 'Assure' and promote awareness of ongoing trends
 - This objective has been rescheduled to start in the next financial year as the configuration of Assure has taken precedence in the previous working year. It will allow the team to include lessons learned from the implementation of the Assure system and provide additional training to Operational personnel
- Revise previous programme for internal audits and audit structure
 - This objective has been rescheduled to the next financial year to allow the opportunity to align the audit programme with the audit module within 'Assure'
- Review DSE requirements for staff returning to the office and support the New Ways
 of Working project in future DSE requirements for the workplace
 - ➤ DSE requirements have been revised and are now being managed successfully through the new Health and Safety Management System 'Assure'. Two additional members of the team have been DSE assessor trained and are able to provide assistance as and when required
- Continue to review COVID-19 documentations and update as required to align with Government guidance
 - ➤ All COVID-19 documentation has been saved and archived for future use should it be required, whilst government guidance is continually being monitored.
- Proactively seek opportunities to reduce contaminates in the workplace through quarterly 'No Time to Lose' meetings and separate working groups as required
 - ➤ A new working group Protection our People Board has been created to assist the No Time to Lose meetings in progressing contaminate issues and seeking resolutions in a timely manner
- Actively engage quarterly with the Eastern Region and London Health and Safety Group
 - ➤ The Health and Safety Manager and Senior Health and Safety Advisor are committed to attend the quarterly Eastern Regional meetings to share learning and best practice as a region
- Continue to progress the reduction of RTC incident reports following a 5% reduction in 2021/22 through our Health and Safety roadshows and department communications.
 This will be monitored through the Occupational Road Risk Group

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- ➤ The Health and Safety team are now working in collaboration with the Corporate Risk department to seek learning opportunities through data analysis and trend identification. It is anticipated that the outcome of this work will be recognised in a reduction of RTC's from the next financial year onwards
- This will also form a key area of discussion during the Health and Safety Roadshows over the next financial year

9.2023/24 Health and Safety Department Objectives

Promote a positive culture in the workplace. Develop and broaden roles and range of activities undertaken by the Service. Be transparent, open, and accessible. Collaborate with our partners. Make best use of our resources.

The Health and Safety departmental objectives for the coming year are to:

- Revise previous programme for internal audits and audit structure
- Review risk assessments for the playing of volleyball on selective stations
- Produce a Managing Safely refresher package for online learning to be used on learnPro
- Engage in new Service wide Health and Safety Roadshow to familiarise crews with new HSMS 'Assure' and promote awareness of ongoing trends
- Actively engage quarterly with the Eastern Region and London Health and Safety Group
- Continue to proactively seek opportunities to reduce contaminates in the workplace through the quarterly 'No Time to Lose' meetings and the project group 'Protecting our People Board'
- Focus on a sustained campaign to reduce RTC incidents through our risk group, Health and Safety roadshows and department communications. This will be monitored through the Occupational Road Risk Group





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Our mission is to make Essex a safe place to live, work and travel.