

Health, Safety and Well-Being Annual Report for 2021-22

July 2022

CONTENTS

Section	Title	Page
1	Introduction and Purpose	3
2	What we said we would do in 2021-22	3
3	The Brunelcare Approach	5
4	<u>Leadership and Management</u>	6
5	External Review of Health and Safety Arrangements	7
6	Health, Safety and Well-being Policy	9
7	Communication and Engagement	9
8	Compliance Monitoring and Reporting	10
9	Training and Support	11
10	Risk Assessments	13
11	Quality Assurance Arrangements	13
12	<u>Fire Safety</u>	13
13	<u>Legionella</u>	13
14	Food Hygiene	14
15	Ensuring the Well-being of Our Staff and Office Safety	14
16	Care Services Health and Safety Compliance	16
17	Compliance: Landlord and Property Health and Safety Arrangements	17
18	Incident Analysis and Risk Profiling	19
19	Compliance: Safety Alerts	21
20	<u>Future Actions and Improvements</u>	21

1. Introduction and Purpose

This is the third Health, Safety and Well-Being Annual Report produced by Brunelcare, and it provides an overview of:

- the steps taken in 2021-22 to further develop and improve the management of health, safety and well-being across Brunelcare;
- the progress made throughout the year on health, safety and well-being related activities, particularly in developing strong and active leadership, improving colleague involvement and improved scrutiny and review;
- health and safety related incidents and activities recorded over the last 12-months;
- an analysis of external factors and challenges that have had an impact on Brunelcare's priorities; and
- improvements identified and the objectives and plans in place to ensure resources continue to be focused and effective in the required areas to ensure continual improvement during 2022-23 and beyond.

2. What we said we would do in 2021-22

In last year's annual report we confirmed that Brunelcare would aim to further strengthen and develop its health and safety arrangements. Building on the progress made in 2020-21, we said we would:

Agreed Action	Progress	See further information in Section
Address the six recommendations set out in the Health and Safety Review Report produced by 21st Century Housing Governance.	All six recommendations have been addressed. A summary of steps taken is provided later in this report.	5
Work with the Health, Safety and Well-being Committee to develop a programme of corporate briefs and health, safety and well-being campaigns. [deferred form 2020-21]	Quarterly H&S newsletters introduced - first to be shared at the end of July 2022.	6
Publish a structured set of documentation and a comprehensive 'Procedures Handbook'.	H&S Handbook drafted and due to be published at the end of July 2022.	6

Put into place an effective internal workplace safety inspection and audit programme.	Rolling programme of H&S Audits in Place.	8
Take steps to ensure compliance with the Building Safety Bill when it comes into operation.	The Bill received Royal Assent on 28 April 2022. Many of the requirements in the Act will take 12-18 months to implement. Preparing for the Bill will be a key feature of next year's H&S Improvement Programme.	See Improvement Plan at Section 20
Undertake a review of training to assess training needs and access training courses relevant to specific roles.	Training needs of Registered Managers and Senior Housing Managers reviewed and IOSH Training rolled out.	9
Following the implementation of the new Cloud HR system, steps will be taken to ensure the regular reporting and analysis of work related absences.	Work on the reporting of work sickness related absences is ongoing.	15
Utilise and update the <u>Learning</u> <u>Management System</u> , to ensure more timely and complete reporting of the health and safety training compliance levels for a particular site or team [rolled forward from 2020-21] .	The H&S Advisor continues to work with the L&D Team to strengthen reporting arrangements.	9
Strengthen our compliance with the Display Screen Equipment Regulations 1992 <i>[rolled forward from 2020-21]</i> .	Revised Self Assessment Process Developed and Implemented.	16
Undertake further analysis of work related ill health information and working with the Health, Safety and Well-being Committee take steps to address these [rolled forward from 2020-21].	The reporting of work sickness related absences is ongoing.	15
Strengthen our arrangements for the management of contractors and introduce a 'permit to work' system to ensure risks to contractors when working on Brunelcare's premises are assessed, managed and mitigated [rolled forward from 2020-21].	Work is ongoing.	These items will be completed as a matter of priority when the new Compliance Manager takes up the position in August 2022.
Adopt relevant H&S policies to	Work is ongoing.	

cover all Brunelcare construction management responsibilities [rolled forward from 2020-21].		
--	--	--

Key:

Action Complete	Action Started	Action Ongoing
-----------------	----------------	----------------

3. The Brunelcare Approach

As reported in last year's annual report, Brunelcare provides a diverse range of services in a variety of settings, therefore in developing and embedding our health and safety approach we have taken account of:

- The clients we serve the majority of our residents are vulnerable and in need of care and support.
- Our staffing the services they are required to provide and where they are provided, for example our domiciliary staff are often required to work alone and in their clients' homes.
- The geographical spread of our services we provide services across Somerset, South Gloucestershire and Bristol.
- The diversity and complexity of our asset portfolio many of our properties are old and in need of upgrading.

The Charity is committed to driving continuous improvement in our health, safety and well-being arrangements and is constantly reviewing and strengthening its arrangements to achieve this.

To promote a positive **health and safety** culture, the Board has taken steps to ensure:

- Strong corporate commitment from the Board and the Senior Leadership Team;
- Regular engagement and co-production of improvement initiatives working with employees and recognised Trade Union colleagues;
- Compliance with legislation and safe working procedures;
- A high corporate profile with effective performance and audit management systems;
- Maintaining a positive attitude towards health and safety objectives;
- Effective training, communication and awareness campaigns;
- Robust working practices and arrangements for effectively controlling hazards; and

 Sufficient capacity to benchmark with others, and to learn from accidents, near misses and safety performance indicators to strive for continual improvement.

To promote **better well-being** at work, the Board focuses on measures to ensure:

- An effective work-life balance and programme of staff engagement initiatives;
- A healthy lifestyle (including physical activity, healthy eating and musculoskeletal improvements); and
- Positive mental well-being (including work related stress).

4. Leadership and Management

The Board and its Committees

The Board of Brunelcare has overall strategic responsibility for all health and safety matters, but has delegated day to day responsibility for the implementation of health and safety arrangements to the Chief Executive Officer (CEO). It has also delegated the strategic oversight of the engagement and communication elements of health and safety matters to the Health, Safety and Well-being Committee (HSWC). While oversight of performance against health and safety metrics sits with the Performance, Quality and Experience Committee. Each committee reports back to the Board on its activities.

During 2020-21, the Board took part in a development session delivered by the Health and Safety Advisor that explored the Board's role in relation to health, safety and well-being.

Senior Leadership Team

Responsibility for ensuring that all members of staff and, so far as is reasonably practicable, clients, tenants and visitors to Brunelcare premises, are aware of their general health and safety responsibilities sits with the Senior Leadership Team.

Through the Senior Leadership Team (SLT) the CEO ensures that there are clear lines of responsibility and communication in place as part of Brunelcare's overall health and safety management system.

Health, Safety and Well-being is a regular SLT agenda item. The SLT receives regular updates on health and safety performance, incidents, investigations and legal issues.

Director of Housing Services

Overall responsibility as a landlord sits with the Director of Housing Services, who acts as the overall lead on property-related health and safety matters.

Director of Nursing and Care Services

Knowledge of CQC requirements with regards to health and safety in the care environment is covered by the line management function in regulated care services, with specific ownership by the Director of Nursing and Care Services.

Company Secretary and Head of Corporate Governance

The Company Secretary and Head of Corporate Governance leads on the corporate health, safety and well-being agenda and ensures that these matters are regularly reported to the Board and its Committees.

Health and Safety Advisor and Property Compliance Manager

Detailed technical knowledge sits with the Health and Safety Advisor and the Property Compliance Manager, each of whom stay up to date with continuing developments by means of continuous professional development (CPD). These are kept under management oversight by their respective line managers.

The Health and Safety Advisor is Brunelcare's designated 'competent individual' as defined by the Management of Health and Safety at Work Regulations 1999. The current incumbent joined Brunelcare in October 2020. This role is located in the Governance team to facilitate direct reporting to the Board and scrutiny across the organisation.

Registered Managers

In addition to the requirements set out in the Health and Safety at Work Act 1974, during 2020-21, each of our registered managers of care homes, extra care housing facilities and community services worked with their teams to ensure continued compliance with the health and safety requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

Health, Safety and Well-being Representatives

In 2020-21, Health, Safety and Well-being Representatives were elected across the organisation. Representing a specific Brunelcare site or function. Health, Safety and Well-being Representatives play a key role by disseminating information to colleagues in the area they represent and escalating concerns through their role on the Health, Safety and Well-being Committee.

5. External Review of Health and Safety Arrangements

In 2020-21, the Board commissioned an external review of health and safety arrangements and the outcome of this was reported to the Board in March 2021. The review undertaken by 21st Century Housing Governance concluded that:

The arrangements for providing assurance on the health and safety arrangements at Brunelcare were effective and have addressed previously identified historic issues, even where these were specifically impacted by the pandemic. Brunelcare has strong and effective governance oversight of the health and safety arrangements.

Some of the key elements within that framework are already being enhanced as part of the normal process of continuous improvement with a focus on the documentation of policies, procedures and processes and ensuring the consistency of learning and development for key roles. Six recommendations for further improvement were set out in the report, and a summary of the progress is provided in the table below:

Figure 1: Summary of recommendations arising from the external review of health and safety arrangements

Recommendation	Progress
Documentation - finalise documentation relating to policies and procedures.	All health and safety policies are now in place and procedures are being implemented.
Processes - develop an approach that allows for the identification of significant process improvement opportunities, and the means to address any identified inefficiencies, but set in the context of the wider ICT-Digital Strategy.	In December 2021 the Board approved the purchase and implementation of a new Housing Management System. A consultant project manager has been appointed to oversee its implementation and as part of the implementation process a full review of current systems and processes is taking place.
ICT-Digital Strategy - to be clear as to the manner of prioritisation of projects over the life of the Strategy period, in order to sit health and safety themes (including a specific health and safety system) within the wider strategic and regulatory context.	A new Strategy and Transformation Directorate was established at the end of 2021-22. This Directorate oversees all new developments and provides the leadership and secretariat to an IT Transformation Project Group.

Single Point of Failure - address the risk of individuals key to the delivery of the health and safety agenda being unavailable at the same time for some period.	A Health and Safety Apprentice has been appointed to work alongside the Health and Safety Advisor. This step has been taken as part of succession planning.
Governance - to understand the wider data lifecycle management supporting health and safety processes.	Data management is being looked at closely as part of the introduction of a new Housing Management System.
Third party review - to consider a tailored and targeted approach to a review of key business processes. To include a review of three key elements (process efficiency, data and internal controls) in specific areas identified by Brunelcare (such as RIDDOR reporting).	All key health and safety processes have been reviewed and steps taken to improve the reporting and analysis of data.

6. Health, Safety and Well-being Policy: A clear policy is in place. This has the appropriate content, is well set out and is subject to periodic review.

Health, Safety and Well-being Policy

In 2020-21 Brunelcare's Health, Safety and Well-being Policy was updated and strengthened to reflect current structures, roles and responsibilities, as well as the Health and Safety Executive's focus on well-being. The revised Policy was approved by the Board when it met in June 2020.

The Policy provides a clear statement of the requirements, the roles and responsibilities, sources of further information and a process for review and monitoring.

Technical Policies

During 2020-21 the range of policies that address each technical health and safety area (e.g. gas, fire, water hygiene) were updated and strengthened. This includes those improving the day-to-day working environment, such as Display Screen Equipment (DSE) assessments.

Health and Safety Handbook

The Health and Safety Audit Programme highlighted that not all staff were aware of the full suite of policies in place or how to access them. To address this, a comprehensive 'Health and Safety Handbook' has been developed. This will be published at the end of July 2022. Further, from July 2022 quarterly newsletters will be produced to share learning from accidents and incidents and reinforce key health and safety messages.

7. Communication and Engagement: Suitable arrangements for consultation and engagement with employees continued during 2021-22 through the work of the Health, Safety and Well-being Committee Health, Safety and Well-being Representatives.

Health, Safety and Well-being Committee

The Board recognises that its employees understand the risks in the workplace best. Therefore, to ensure timely and appropriate engagement and consultation, the Board of Brunelcare established a Health, Safety and Well-being Committee. The Committee met four times in 2021-22 and its annual report is scheduled to be presented to the Board in June 2022.

The Committee takes a strategic overview of health, safety and well-being issues affecting Brunelcare. It also ensures best practice in health and safety, by promoting communication, co-operation and consultation across the Charity.

The Committee is chaired by the Chair of the Board and has representatives from all areas of the Charity.

Health, Safety and Well-being Representatives

In October 2020, Health, Safety and Well-being Representatives were elected to act as contact points within their service areas on matters of health, safety and well-being.

A training programme for the elected health, safety and well-being representatives was introduced in 2020-21 to enable them to effectively carry out their role.

Colleague Voice

The Colleague Voice is the sole consultative body representing the interests of all employees (other than the SLT), and ensures that there is an opportunity for genuine involvement for all in the Charity's activities and plans.

The objectives include to facilitate a two-way exchange of views on matters concerning the well-being of Brunelcare and all those employed

by it. To ensure that decisions taken are in accordance with Brunelcare's Equality, Diversity and Inclusion Policy and to improve the flow of information about Brunelcare's performance, activities and plans, thus helping to prevent differences and misunderstandings arising between management and other employees.

Senior Leadership Team

Health, Safety and Well-being is a regular Senior Leadership Team agenda item. The Senior Leadership Team receives regular updates on health and safety performance, incidents, investigations and legal issues.

8. Compliance Monitoring and Reporting

Dashboards

Two dashboards are in place, one for property compliance and one for corporate health and safety. Both are reported to the Health, Safety and Well-being Committee, the Performance Quality and Safety Committee and Senior Leadership Team.

The dashboards have been through a robust development process and are continually under review. An internal audit of data integrity completed by Brunelcare's auditors, RSM, concluded that the property compliance dashboard provided reasonable assurance and agreed actions to further strengthen that assurance are underway.

At the time of reporting, other elements of process compliance reporting were still under development; for example the process whereby Brunelcare receives assurance that contractors working on specified equipment are suitably qualified and certificated to do so.

Health and Safety Audits

During 2021-22 a rolling-programme of health and safety audits was introduced. The 2021-22 programme covered all Care and Extra care homes along with 55% (13) of sheltered housing. These audits consisted of both a desktop audit of Charity's premises and compliance records and a physical inspection of the charity's premises.

The audits focused on:

- Policies, procedures, risk assessments, safe systems of work and communication.
- Buildings and grounds.
- High-risk areas and staff training.
- Performance monitoring and measurement.

A number of findings and recommendations arose from these audits that were related to:

- Training and Support (see Section 9)
- Risk assessment (see Section 10)
- Quality Assurance Arrangements (see Section 8)
- Fire Safety (see Section 12)
- Legionella (see Section 13)
- Food Safety (see Section 14)

The audit schedule for 2022-23 has been agreed. The audits will cover policies, procedures, training and guidance within kitchen areas where applicable. Further, the findings and recommendations arising from the 2020-21 audit programme will be followed-up to ensure that action has been taken.

9. Training and Support

Health and Safety Training is a mandatory part of induction. All new members of staff receive an overview of health and safety legislation, health and safety requirements, fire, infection control and manual handling.

In 2021-22, owing to the continued impact of the COVID-19 pandemic, the majority of training was carried out online due to social distancing rules. The following on-line training was available:

- Asbestos Awareness;
- COSHH;
- Display Screen Equipment;
- Moving and Handling (loads);
- Infection Prevention and Control;
- Legionella Awareness; and
- Lone Working.

In line with their individual role and responsibilities, members of staff receive additional training on the various aspects of health and safety, such as:

- Manual handling;
- Fire and use of SkiPads;
- Management of waste and sharps; and
- Food Hygiene.

Compliance with Mandatory Training

Compliance with mandatory training is reported to the Health, Safety and Well-being Committee on a quarterly basis. During the year an issue with the completeness of information held on eLFY, the Learning Management System utilised by Brunelcare, was identified. At the time of reporting, the Learning and Development Team were working with the operational teams to address this.

Institution of Occupational Safety and Health (IOSH) Managing Safely Training

In 2021-22, a review of health and safety training was undertaken to assess training needs and access to training courses relevant to specific roles. Further, health and safety audits identified a need to further support managers to understand their role and responsibilities in relation to health and safety matters. As a result, all registered managers across care homes, community services and ECH have been enrolled on IOSH for managers training course. Such training has also been rolled out to senior managers in housing.

Dissemination of Knowledge and Ensuring Policies and Practices Remain Up-to-date

Dissemination of health and safety knowledge takes place by:

- The use of mandatory training during the induction process;
- Ongoing training via the corporate learning and development process; and
- The network of Health and Safety Representatives whose work is co-ordinated and overseen by the Health Safety and Well-being Committee.

Any changes to legislation or best practice, such as the implications of a new Building Safety Regulation or an enhanced Decent Homes Standard, are documented and addressed through the Governance Team's legislative and regulatory monitoring arrangements and the Continuous Professional Development arrangements of key personnel.

10. Risk Assessments

Responsibility for ensuring that general health and safety risk assessments are carried out on all potential health and safety hazards in the workplace lies with the CEO. Typically this task is delegated to Managers within each service area.

The Audit identified the need to improve the guidance available on how to carry out general risk assessments.

Since the audit, a full suite of comprehensive general Health and Safety Risk Assessments, as required by the Management of Health and Safety at Work Regulations 1999, as been developed These include Control of Substances Hazardous to Health (COSHH) assessments and general health and safety risk assessments covering the main work processes that the Direct Labour Operatives (DLO) carry out.

A full general risk assessment library has now been developed and made available on BORIS.

11. Quality Assurance Arrangements

A clear and documented regime in internal quality assurance (QA) checks that include an assessment of general health and safety requirements, legionella and fire safety is in place across all services. The outcome of the 2021-22 audit programme will be used to strengthen these where necessary.

12. Fire Safety

As part of the audit the fire risk assessment for each of the sites included in the audit were reviewed along with any identified actions. It was found that:

- all of the Fire Risk Assessments had been completed in the twelve months prior to the the audit visit;
- all buildings had a fire safety logbook but some of these were in need of updating:
- procedures detailing the procedure to follow when checking fire doors and means of escape needed to be put in place;
- steps to increase the frequency of fire evacuation exercises were needed;
- the fire evacuation strategy for some care homes was in need of review.

Steps to address the above are in place.

13. Legionella

The water management risk assessments were reviewed on site and discussions held with managers about the implementation of the Legionella Management Policy.

The audit confirmed that a robust Water Management Policy in place and that water management risk assessments had been completed. A number of areas where further work to strengthen arrangements is needed was highlighted and these are being addressed by the housing

and property team. Identified actions included:

- Ensuring water schematics, water management plans and water log books are available on each sheltered housing site;
- Strengthening arrangements for water sampling on sheltered housing sites; and
- Making staff procedures for water safety checks more user friendly.

14. Food Hygiene

A training program and food safety management plan is in place that is aligned to Safer Food Better Business (SFBB), but arrangements for monitoring compliance were found to be in need of strengthening. In addition, the format and content of documentation used across sites was not always consistent.

Risk Assessments were not always available on site, relating to COSHH, Manual Handling, Slips, Trips, and Falls, Cuts, Burns, or the Cleaning of Equipment. The latter was especially concerning as the oil that is used in the deep fat fryers can reach >175 - 200°C, posing a high risk.

One of the recommendations arising from the audit was that sites complete an e-coli control document due to the size of many of the kitchens and the limited bench space.

15. Ensuring the Well-being of our Staff and Office Safety

Work Related Sickness Absence

From April 2021 to March 2022 a total of 608 sickness hours related to work were recorded:

Figure 2: Summary of time lost due to work related sickness absences

Absence Reason	Number of Days Lost (excluding weekends)	Number of Hours Lost (based on an average shift length of 8 hours)
Accident at Work	45	360
Stress/Depression/Anxiety	21	168
Headache/Migraine/Dizzy	1	8
Other	9	72
Total	76	618

Figures provided exclude absence due to Covid-19:

Analysis of sickness figures is undertaken to help inform health, safety and well-being plans and the support provided to colleagues.

The Steps We Taking to Support the Well-being of Employees

Mental Health First Aiders

Brunelcare is committed to treating mental health as seriously as physical health and general employee wellbeing. As part of this continuing commitment, there are 48 Mental Health First Aiders across the Charity who are able to provide first-line support to colleagues who may be in need of assistance.

We will be aiming to train additional colleagues now that COVID-19 restrictions are being eased.

Mental Health First Aiders have:

- An understanding of mental health and the factors that can affect wellbeing;
- Practical skills to spot the triggers and signs of mental health issues;
- Confidence to step in, reassure and support a person in distress;
- Enhanced interpersonal skills such as non-judgemental listening;
 and
- Knowledge to help someone recover their health by guiding them to further support - whether that's self-help resources, through their employer, the NHS, or a mix.

Contact details of Mental Health First Aiders continue to be included in all bulletins and other communications to employees as well as being published on our Intranet.

Care First

As part of our commitment to our colleagues we still continue to provide Care First.

Care First offers comprehensive advice, information and articles covering personal and work-related issues. They offer 24-hour telephone access where every call is answered immediately by a Care First directly employed and qualified counsellor who can immediately begin providing support for personal or work-related issues.

They also offer online and face-to-face counselling, which includes real-time one-to-one secure access to support through their online messenger style service. Confidentiality, security and anonymity are

guaranteed. The online service connects individuals with one of their qualified counsellors.

Finally, they offer an information service providing telephone and online access to a team of dedicated, professionally qualified information specialists who can provide practical information and advice on all common topics including – Consumer, Legal, Finance, Housing, Benefits, Family and much more besides.

Lone Working Devices

We continue to use the lone working app called Stay Safe, This has replaced the older Solo Protect devices. The app links a lone worker with 24/7/365 support. Users are able to log on and off the system and it will automatically raise an alarm if the user does not log off following an appointment. In addition, it has a panic facility that can be used should a colleague experience verbal abuse or physical aggression.

The devices have been distributed within the property, housing and community teams and their use of them is monitored internally by the appropriate manager.

Office Health and Safety

Brunelcare has a duty to ensure that all our workspaces are safe and free of hazards. We recognise that there are a number of areas where improvements are needed.

In 2021-22 we strengthened our arrangements for ensuring compliance with the Display Screen Equipment Regulations 1992 with the introduction of a new online DSE self-assessment tool which is available on BORIS.

In addition, should concerns be raised on the DSE self-assessment form, we have arrangements in place to undertake a full DSE assessment.

16. Care Services Health and Safety Compliance

Maintaining compliance with the CQC in the Key Line Of Enquiry (KLOE) area of 'Safe' across all homes is a key health and safety requirement for Brunelcare.

Care Homes: During 2021-22 all areas had an overall rating of Good or Outstanding with the CQC and are rated 'Good' in the domain of 'Safe'. The KLOE and prompts for the domain of Safe are mandatory for adult social care services and cover safeguarding, risk assessment, sufficient numbers of suitable staff, safe use of medicines, prevention and control

of infection and lessons learned and improvements made when things go wrong. Each site collates evidence files in relation to CQC compliance and these can be accessed during any site visits or Quality Assurance visits by the central support team.

Following the end of the 2021-22 financial year, Little Health Care and Support was inspected by the CQC in April 2022. This resulted in a 'Requires Improvement' rating in the domain of 'Safe'. A full action plan is in place to address issues raised as a part of this report to ensure a safe service is maintained.

ECH and Homecare: All of our Extra Care Housing schemes, Woodland Court retirement living village and Bristol and South Glos domiciliary care services have overall CQC ratings of 'Good' including the domain of 'Safe'. CQC evidence files are held within each local office that supports the rating of the KLOEs, they then triangulate this information with client visits to their own homes and phone calls to employees, clients, families and professionals.

Our Somerset domiciliary care service during 2021-22 had a rating of 'Requires Improvement' against the CQC domain of 'Safe'. This rating was given following an inspection carried out by the CQC on 26 February 2019. Actions were taken to address the findings of the inspection and the service was reinspected in April 2022, restoring the rating to 'Good'.

17. Compliance: Landlord and Property Health and Safety Arrangements: Brunelcare has continued to take steps to strengthen its landlord and property health and safety arrangements

Steps Taken to Strengthen Arrangements in 2021-22

During the last 12-months, Brunelcare has continued to take steps to strengthen its landlord and property health and safety arrangements, these include:

- Maintaining a Full Asset Register across Care, Extra Care and Sheltered Accommodation Sites to enable the Property Department to:
 - Hold a greater understanding of the assets under its control and their maintenance requirements;
 - Plug any gaps in statutory compliance events that were previously unknown due to the lack of site information;
 - Accurately measure what we know when reporting on compliance matters;
 - Develop a 30-year program of replacement in relation to lifecycle, forecasting budget cost; and
 - RAG rate assets in relation to their current condition.

All of the above help the Asset and Compliance teams to accurately manage each site's assets in an efficient and effective manner based on facts and safe in the knowledge that we now have an accurate and comprehensive list of assets and items under our management and control.

- Budgeting to conduct a full stock condition survey during 2022-23.
- Fortnightly meetings being held with the compliance team and departmental director to review status and action.
- Appointing a dedicated resource to manage and maintain PIMSS regarding asset management & compliance.
- Agreeing on a new housing management system which includes a module for compliance and asset management so that all can be managed through one source. Once live PIMSS will no longer be used.

Property Compliance Works

Detailed reports outlining the progress made to ensure full compliance with all landlord and property health and safety requirements were submitted to each meeting of the Performance, Quality and Experience Committee during 2021-22.

Despite the impact of the COVID-19 pandemic on staffing and the ability of staff and contractors to access properties, as at the 31 March 2021:

- There was low risk documented for each of these compliance areas:
 - Gas Safety:
 - CQC 'safe' Key Line of Enquiry (KLOE) requirements;
 - Gas Servicing;
 - Legionella Risk Assessments;
 - Emergency Lighting Checks;
 - Warden Call Point checks;
 - Dry Riser testing:
 - Fire Extinguisher testing;
 - Lightning Conductor testing;
 - Sheltered Accommodation PAT Testing;
 - Boundary Wall Inspections;
 - Lift LOLER inspections;
 - Roof Access Man Safe testing;
 - Legionella Risk Assessments;
 - Domestic and Communal Fixed Wire Testing;
 - Catering Equipment CP24s and TR19 Duct Cleaning; and
 - Gas Laundry Dryer Maintenance and CP24s.
- There was one area with a medium risk documented:
 - Fire Risk Assessments in offices (Bridgewater scheduled to be completed by the H&S Advisor).

 The matter of cloned Asbestos Surveys was brought to the Board's attention on 10 March 2020, work continues to ensure we have 100% asbestos surveys for individual dwellings. This work has been hindered by COVID-19 and tenants being unwilling to provide access. Currently, there are 16 dwellings (2%) outstanding. We continue to work with Tersus, our Asbestos Survey providers.

Asset Management Strategy

The Asset Management Strategy for 2020-25 was approved by the Board in July 2020. The strategy's aim is to provide homes to feel proud of where our people choose to live and thrive.

The strategy introduces an active asset management approach and acknowledges key areas of improvement within our current stock around energy performance, additional compliance and health and safety work, and improved space standards. It also outlines the investment required over 30 years through a robust capital investment program in order to mitigate Decent Homes failures.

This investment will contribute to creating healthy homes and sustain tenancies, however, Brunelcare's aim is to go beyond Decent Homes alone by creating a new property standard, which will deliver high quality, safe and affordable homes, that supports the needs of our residents over the next 10 years.

18. Incident Analysis and Risk Profiling

Set out in the table below are details of the main health and safety accident and incident statistics for 2021-2022:

The distinction in incident types as defined by IOSH are outlined below:

- **Accident** an event that results in injury, ill health, or damage to equipment.
- **Incident -** where an event actually happened but did not result in any injury, ill health or damage to equipment.
- **Near miss -** where an event could have happened but did not result in any injury, ill health or damage to equipment.
- Dangerous occurrence an undesired event that causes significant damage to plant, premises, equipment or the environment.
 Dangerous occurrences do not harm people, but they have the potential to.

Figure 3: Summary of accidents, incidents, near misses and dangerous occurrences

Service	Accidents	Incidents	Near	Dangerous
---------	-----------	-----------	------	-----------

			Misses	Occurrence s
Care Homes	4	2	-	-
Community Services	19	6	-	-
ECH	24	11	-	-
HQ Staff	-	2	1	1
Sheltered Housing	3	6	-	-
Total	49	27	2	1

There were a total of 76 reported accidents/incidents in 2021-22. 29 of these resulted in injury, including cuts and bruises. Of the 76 some 50 or (66%), were related to slips, trips and falls. 16 falls required treatment and 7 clients attended hospital following a fall; further analysis is provided in the table below.

The reported dangerous occurrence related to a potential carbon monoxide (CO) leak at an ECH site. The Fire service, gas board and our approved contractor attended, the area was tested resulting in a normal reading.

The near miss related to a staff slip on a step on the main staircase at head office, that did not result in injury.

Further steps are needed to ensure that near misses are being reported as research shows that the norm is for 90 near misses to be reported per one accident.

Figure 4: Overview of the types of accidents, incidents and near misses

Accident / Incident Type	Number	Accident / Incident Type	Number
Aggressive Behaviour resulting in injury	3	Needle Stick Injury	1
Animal or Insect bite	1	Other - injury resulting from opening lift door open	1
Burn/Scald	1	Road Traffic Accident	1
Laceration/contact with sharp edge	1	Trapped Finger	1

Fall, slip or trip	54	Other - injury resulting from walking into door handle	1
Fire/explosion - due to faulty light fitting	1	Machinery/Equipment	1
Handling lifting or moving resulting in a strain/muscular injury	9	Total	76

The majority of accidents/incidents reported related to slips, trips and falls, the majority of these were as a result of a clients frailty and clinical presentation. Work is ongoing with the Director of Nursing and Care Services to look at how we report client falls that are due to their clinical presentation and those that were due to a health and safety matter.

There are currently two ongoing claims against Brunelcare that relate to accidents that occured on Brunelcare premises, investigations and documentation have been submitted. We are awaiting feedback from our liability provider.

Health and Safety Enforcement (Statutory Breaches)

ABC Centre was visited by Bristol City Council on 2 February 2022. At this time a food hygiene audit was undertaken and the site subsequently received a food hygiene rating of 1, indicating that major improvement was necessary. Three areas were inspected at this time, that included:

- How hygienically the food is handled (4 C's Cooking, Cooling, Cleaning, and Cross Contamination).
- The condition of the structure of the premises, including cleanliness and layout.
- How the premises manages and records what it does to ensure food is safe to eat. Safer Food Better Business (SFBB).

An internal audit was undertaken. While evidence of action being taken to address the findings outlined in the Food Safety Officer's Report was provided, several key issues were identified that contributed to the Food Hygiene Rating of 1. These findings were reported back to the SLT for consideration.

RIDDOR Reportable Incidents

Brunelcare had two reportable accidents in 2021-22. Both were due to manual handling incidents which resulted in strained backs.

Personal Injury Claims

There was one employee liability claim made in relation to accidents at work and injuries to members of the public during 2021-22.

19. Compliance: Safety Alerts

Safety alerts are issued by the Health and Safety Agency, the Health and Safety Authority and the Medicines and Healthcare Products Regulatory Agency when there is a specific safety issue that without immediate action being taken could result in a serious or fatal injury.

Further, recall notices may be issued where a product is found to be faulty and noted on the UK Government's Product Recall site.

During 2021-22, no safety alerts relevant to Brunelcare were issued.

20. Future Actions and Improvements

Brunelcare will aim to further strengthen and develop its health and safety arrangements.

In 2022-23 we will:

- 1. Develop and implement a suite of procedures to support H&S Policies.
- 2. Work with operational directors to ensure a consistent approach to the local audit of health and safety compliance.
- 3. Review local legionella procedures and ensure testing across sheltered housing sites is standardised.
- 4. Continue to work with the Health, Safety and Well-being Committee to develop a program of corporate briefs and health, safety and well-being campaigns.
- 5. Utilise and update the Learning Management System, to ensure more timely and complete reporting of health and safety training compliance levels for a particular site or team.
- 6. Deliver a health and safety audit program for 2022-23.
- 7. Strengthen our arrangements for the management of contractors and introduce a 'permit to work' system to ensure risks to contractors when working on Brunelcare's premises are assessed, managed and mitigated. [deferred from previous year]
- 8. Adopt relevant H&S policies to cover all Brunelcare construction management responsibilities. [deferred from previous year]
- 9. Take steps to prepare for and ensure compliance with the Building

- Safety Bill [deferred from previous year]
- 10. Continue to work with the Learning and Development Team to ensure more timely and complete reporting of the health and safety training compliance levels for a particular site or team

The delivery of these actions will be monitored by the Performance, Quality and Experience Committee with input from the Health, Safety and Well-being Committee