

**REPORT of
DIRECTOR OF NEIGHBOURHOOD SERVICES AND COMMUNITIES
PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE
22 JANUARY 2026**

HEALTH AND SAFETY UPDATE - QUARTER TWO 2025 / 26

1. PURPOSE OF THE REPORT

1.1 To provide an update on Health and Safety (H&S) statistics and activity during Quarter Two (Q2) (1 July to 30 September 2025).

2. RECOMMENDATIONS

- (i) That Members consider the accident and incident statistics and incidences of unacceptable behaviour reported;
- (ii) That Members consider progress of key health and safety themes (as per Section 3.2).

3. SUMMARY OF KEY ISSUES

QUARTER TWO 2025 / 26

3.1 Summary of reported incidents:

3.1.1 There were thirteen accidents and incidents (two of which were first aid-only events), nine near misses and two hazards reported during Q2. A larger number of reports were received during the period as it coincided with publicly attended events organised by Maldon District Council (MDC) (UFEST in Promenade Park and the Walking Festival in locations around the district) and the busy summer period. Similarly, the increase in near-miss reports is for the same reasons but is demonstrative of staff showing good awareness of health and safety issues. Two near misses were seen as having significant potential for injury. These related to the failure of a window frame at the main offices and the provision of the stray dog collection service. Both events were investigated and corrective measures implemented. A table of reports can be found in **APPENDIX 1**.

	Accidents and Incidents	Hazards and Near Misses	No. where full investigation conducted*	No. where risk mitigation is recommended
Events involving MDC Staff	2	11	2	8
Events involving Public	11	0	0	1
Other	0	0	0	0

Number of accidents, incidents or near misses that are RIDDOR Reportable are given in brackets. Diseases/ill health suspected to be work related but not attributed to a particular event will be provided in the 'Other' designation. *A full investigation is normally conducted where injury is suspected to be caused by a defect in MDC assets or work processes or for an event where there was a significant likelihood of significant harm occurring.

3.1.2 There were seven incidents of unacceptable behaviour reported with four being by telephone, two via e-mail and one experienced in-person. Two of the incidents appeared to involve repeat offenders. One incident was particularly unpleasant in that it involved credible threats of harm. MDC continues to report to the Police where appropriate; support impacted officers and implement measures to ensure the safety of staff. A table of incidents can be found in **APPENDIX 1**.

Type	Severity				Mitigative Measures	Police Notified
	High	Med	Low	Vex.		
In Person	-	1	-	-	0	0
Via e-mail	-	1	1	-	1	0
Via Telephone	-	3	1	-	3	3
Other Means*	-	-	-	-	-	-
Partner Referral	-	-	-	-	-	-

*Other Means – Unacceptable behaviour received by other means (e.g. indirectly via social media posts, or letter sent by post etc.). Vex. = Vexatious contact or contact with obstructive or malicious intent.

3.2 Health and Safety Actions

3.2.1 A number of actions are set out below. Work continues to progress these with all completed actions removed.

Subject	Action	Update / Progress
Emergency Procedures	(i) To revise and improve the fire and evacuation procedure at main MDC locations.	(i) Fire drills at offices on schedule. Drills at depots completed however increase in frequency required. (ii) Emergency equipment at offices now documented for responders.
Unacceptable Behaviour	(i) To revise the policy (ii) To improve system for reporting Unacceptable behaviour	(i) Completed. (ii) Completed.
H&S Training	(i) To determine H&S training requirements (Corporate and Teams)	(i) Training identified. Requires monitoring by department Managers. (ii) Funds assigned to corporate H&S training for remainder of 2025 have allowed booking of courses identified.
Risk Assessment	(i) To implement a new risk assessment register / master list	(i) Master list in place. Will require ongoing review and monitoring. (ii) Corporate risk assessments now completed in draft. Reports required for additional resources required. (iii) Training to support transport

Subject	Action	Update / Progress
		procedure being implemented.
Lone Working	(i) To revise lone working procedure and to ensure implementation of appropriate hardware to support these measures.	(i) Details of revised procedure agreed. Corporate lone working device now in procurement phase after manager engagement exercise.
Audit / Inspection	(i) To ensure service teams and work locations across MDC are in compliance with H&S Legislation	(i) Mini-audit of Parks and Maintenance depots completed. Reports for Parks depot and other assets now complete. Maintenance depot outstanding. (ii) Observation of working practices to be established by teams. Tools provided. Exploring potential use of computer applications to improve process and accessibility of the tools. <i>Reiterated as part of recent audit finding.</i> (iii) Draft schedule of site inspections proposed, with Teams for comment.

3.3 Health and Safety Groups

- 3.3.1 The Senior Managers group continues to meet every six weeks to progress and review performance on health and safety. Efforts continue to maintain accountability and the tracking of actions raised to this group. Routine updates from each service area are now conducted as part of these meetings. Group will feed into the Senior Leadership Team (SLT) to ensure continued engagement during the restructuring of departments / roles and thereafter for corporate oversight.
- 3.3.2 Safety Action Team (of Safety Representatives) meet quarterly with minutes distributed via notice boards. Team is currently exploring designs for the production of an 'emergency card' that can be issued to all staff.

3.4 System Resources

- 3.4.1 Work continues to improve health and safety performance in a number of service areas. Resources for health and safety improvements have now been agreed in principle with the Chief Finance Officer for both the current financial period and future years.
- 3.4.2 Further work to enhance the visibility of health and safety performance in the new corporate structure is being undertaken. A highlight report submitted to SLT has been agreed as providing the appropriate level of governance.

Department defined performance against each assigned Health and Safety activity



3.5 Fire Risk Assessments

3.5.1 Actions generated from the Fire Risk Assessments are being progressed. Progress has been made to close a number of actions for the main offices. Those for the depots require attention. Drills continue to be conducted with spot checks made during depot audits and inventory exercises. Work to the fire detection and alarm system will require the modification of procedures for the main offices in due course.

3.6 Policies and Procedures

3.6.1 The revised Health and Safety Policy was approved by the Council in September 2025 with the Statement of Intent now available on the authority's website. The Policy was communicated to staff via the One Team newsletter and the Chief Executive briefing.

3.6.2 Work is underway to review and update all corporate policies and procedures that have expired. Those requiring minor amendments are largely completed, whilst those requiring more significant changes are being reviewed by policy working groups.

3.7 Health and Safety Inspections

3.7.1 Annual mini-audit inspections of the Council depots have been completed. A schedule of staff-led H&S inspections has been devised (along with inspection proformas). Work continues on a tablet-based application to assist with this work.

3.7.2 An inspection of the Blackwater Leisure Centre was conducted. The report is in preparation. Essex County Fire and Rescue has been approached with regards to conducting a familiarisation visit, as is good practice for such venues.

3.8 Legionella

3.8.1 Routine work of the council's contractor continues. Items concerning legionella, identified as part of the mini-audit inspections (see Section 3.7 above) have been raised in the respective reports. A number of staff have been scheduled to undertake legionella awareness training.

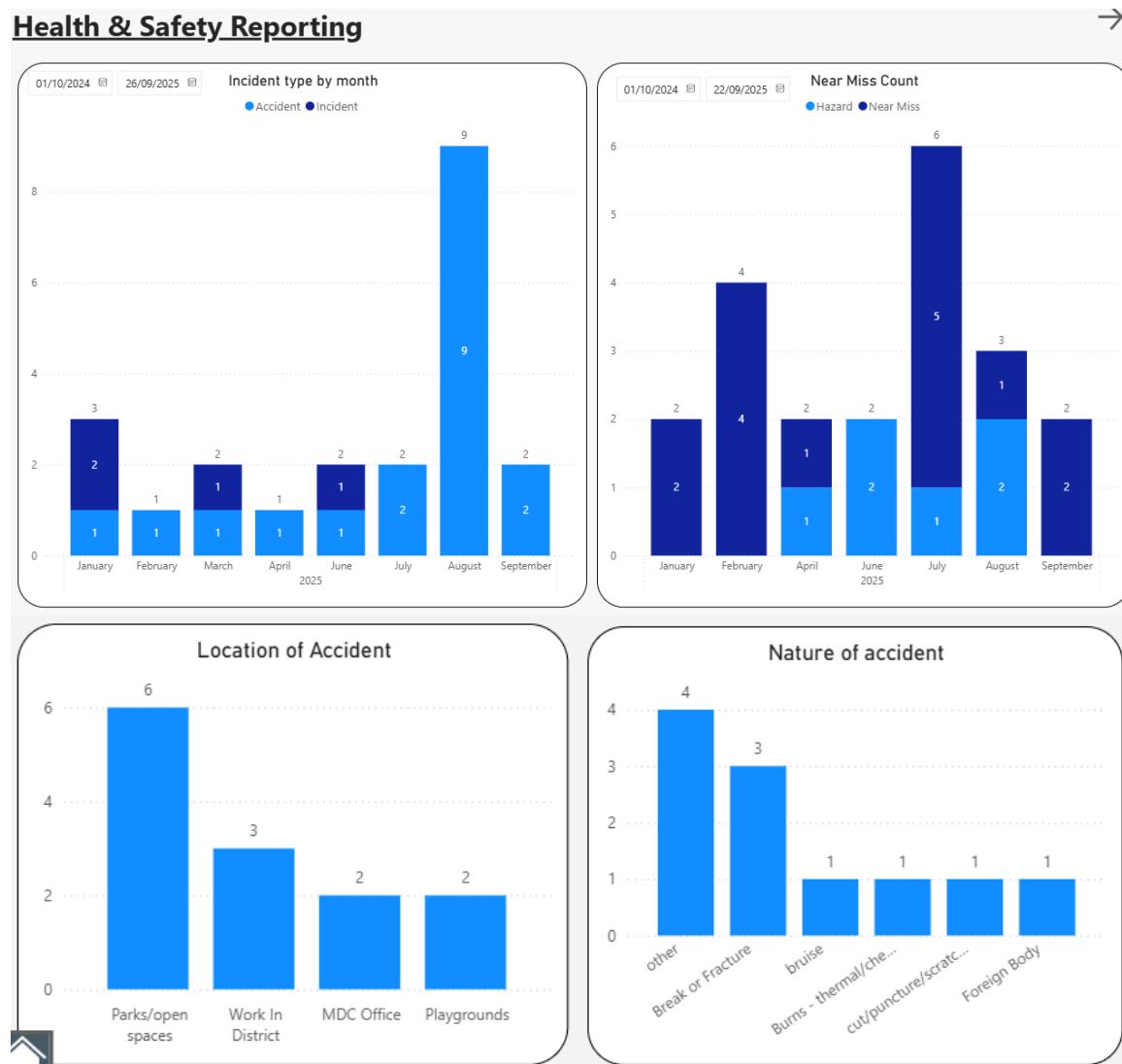
3.9 Training

3.9.1 No training sessions were scheduled in the period; however, a series of sessions were booked for the winter months. Managing telephone Aggression, Driving Safely, Fire Marshal, Lone Working, Manual Handling and Ladder user courses have all been scheduled. Discussions have commenced with colleagues at Mind regarding training and support their organisation can offer as group 'debrief sessions' for teams experiencing potentially violent and aggressive customers.

3.9.2 Further work on administering e-learning modules for health and safety topics, tailored to specific teams is required. Three topics are currently live but there are an additional eleven in the health and safety training library.

3.10 Accident-Near Miss Reporting

3.10.1 There was a peak in the number of accidents and near misses reported over the summer months. This is anticipated due to the increased footfall at our parks and other assets during this time and the busy period for many teams that make up Assets Countryside and Coast. In addition, MDC-organised events such as UFEST and the walking festival have also contributed to the numbers. It must be stressed however that some of these incidents were outside of the authority's control and could include events such as a slip or trip experienced by a participant or someone requesting first aid assistance because of a pre-existing condition.



3.11 Health and Safety Audit ([Audit Actions 2024-2025 doc](#))

- 3.11.1 There was one audit action deadline during the reporting period concerning the review of corporate health and safety procedures and their release to staff via the corporate H&S SharePoint folders. This was deferred to a later date due to the rate of progress in completing this task. Many documents have been revised, however those that require significant modification (for example to working practices or allocation of resources) are outstanding.
- 3.11.2 It is noted that an audit action scheduled for Q1, namely the implementation of a schedule for area inspections was also previously deferred and remains outstanding. Progress has been made, especially with regards to the production of a user-friendly application, however it is felt that this cannot be considered complete until the inspections have been embedded amongst the teams.

3.12 Priorities going forward

- 3.12.1 The priorities for the next quarter will be to complete the remaining tasks set out in the Audit Action Plan including work to review, and revise where necessary policies and embed health and safety inspections. Outside of the audit, work will be necessary to progress with corporate health and safety training, which has commenced and procure and implement a device to support lone workers across the authority (see table in section 3.2.1) Some additional training for the newly formed SLT group on the authority's health and safety management system may also be required.

4. CONCLUSION

- 4.1 Accidents, near misses and incidents of unacceptable behaviour during Q2 2025 / 26 have been set out within this report.
- 4.2 Proactive work on the main health and safety themes continues and good progress is being made.
- 4.3 Additional health and safety improvements will continue to be implemented alongside close-out actions arising from the recent health and safety audit.

5. IMPACT ON PRIORITIES AS SET OUT IN THE CORPORATE PLAN 2025 - 2028

5.1 Delivering good quality services.

- 5.1.1 Good health and safety management of the workplace, for example, management of asbestos and legionella, helps provide a safer and healthier environment in which to live and work.

6. IMPLICATIONS

- (i) **Impact on Customers** – Good health and safety management reduces the number of accidents and injuries to both customers and employees alike. Reduced staff absence resulting from work related injuries or ill health ensures a better service is provided to customers.
- (ii) **Impact on Equalities** – None.

- (iii) **Impact on Risk (including Fraud implications)** – Poor management and insufficient investment in health and safety can lead to accidents, injuries, occupational ill health or dangerous occurrences. This may result in avoidable sickness absence, regulatory intervention and/or civil claims. Effective risk management can build public trust, demonstrating the Council's commitment to the wellbeing of its communities and the responsible use of public resources.
- (iv) **Impact on Resources (financial)** – Costs associated with the initiatives set out in the report and other future initiatives, will be considered as part of the budget round 2026 / 27.
- (v) **Impact on Resources (human)** – Compliance is dependent upon Managers completing their Health and Safety actions within their service plans and having the time and resources to achieve this. The positive impact will be manifest through proactively preventing accidents and ill health, reducing reputational damage, personal injury and other associated costs. By investing in health and safety, which includes improving training and levels of competence, staff will feel valued leading to better morale and staff retention.
- (vi) **Impact on Devolution / Local Government Reorganisation** - All employers, including local authorities are legally required to have a health and safety policy in place and are at risk of enforcement action if they fail to do so. Where authorities merge, details of the arrangements put in place for health and safety may need to change, but the general themes of policy (i.e. why, who and how the policy must be administered) will be broadly similar. It is anticipated that government re-organisation will lead to changes at an operational level which will be addressed using new procedures and supporting documentation when so required.

Background Papers: None.

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