



**REPORT of
DIRECTOR OF NEIGHBOURHOOD SERVICES AND COMMUNITIES
PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE
4 JUNE 2026**

HEALTH AND SAFETY UPDATE - QUARTER FOUR 2025 / 26

1. PURPOSE OF THE REPORT

- 1.1 To provide an update on Health and Safety (H&S) statistics and activity during Quarter Four (Q4) 1 January to 31 March 2026.

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

3.1 Quarter Four 2025 / 26

3.1.1 Summary of reported incidents

- 3.1.2 There were four accidents and incidents, two near-misses and one hazard reported during Q4. Two accidents involved Members of the Public, but neither could be determined to be the result of deficiencies in Maldon District Council (MDC) assets or working practices. One incident involved damage to a vehicle and appropriate remedial action was put in place. A table of reports can be found in **APPENDIX 1**.

	Accidents & Incidents	Hazards & Near Misses	No. where full investigation conducted*	No. where risk mitigation is recommended
Events involving MDC Staff	1	3	1	4
Events involving Public	3	1	0	2
Other	0	1	0	1

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.

3.1.3 There were eleven incidents of unacceptable behaviour reported with ten being by telephone and one experienced in-person. The incident experienced in person did not involve physical contact. Of the reports made, three were generated using the Council's 'quick capture' report form. All reports are vetted by an administrator to ensure the correct categorisation and if necessary, support given. A table of incidents can be found in **APPENDIX 1**.

Type	Severity				Mitigative Measures	Police Notified
	High	Med	Low	Vex.		
In Person	1	-	-	-	1	1
Via e-mail	-	-	-	-	-	-
Via Telephone	-	2	5	3	5	0
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 the main offices are on schedule. The next drill will need to accommodate the new fire and door access systems. (ii) New equipment installed to improve response to a range of emergency scenarios.
H&S Training	(i) To determine H&S training requirements (Corporate and Teams).	(i) Training plan for 2026-2027 presented to Senior Leadership Team (SLT) and arrangements now in progress.
Risk Assessment (RA)	(i) To implement a new risk assessment register / master list.	(i) Master list in place. Will require ongoing monitoring. Some RA's approaching their review period (ii) RA's required for Cemeteries Team due to reorganisation of Neighbourhoods, Services and Communities Directorate.

Subject	Action	Update / Progress
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 procured, training and implementation to commence shortly. Sign-off from SLT now requested.
Audit / Inspection	(i) To ensure service teams and work locations across MDC are in compliance with health and safety legislation.	(i) Routine area inspections of assets such as depots and cemeteries now in place as per schedule. Electronic reporting forms have been developed and are being tested. (ii) Observation of working practices (i.e. 'site supervisions') to be established by teams. Additional work on the supervision of contractors is required.

3.3 Health and Safety Groups

3.3.1 The stand-alone Senior Managers group meetings for health and safety have now been incorporated into the new Senior Management Team (SMT) agenda. Discussions with the Director of Neighbourhoods, Services and Communities to explore the most suitable method for sharing progress on health and safety matters are ongoing.

3.3.2 The Safety Action Team (of Safety Representatives) meet quarterly with minutes distributed via notice boards. The team has agreed a design for an emergency card to be held by staff. In-vehicle instruction card also developed to accommodate various emergency situations.

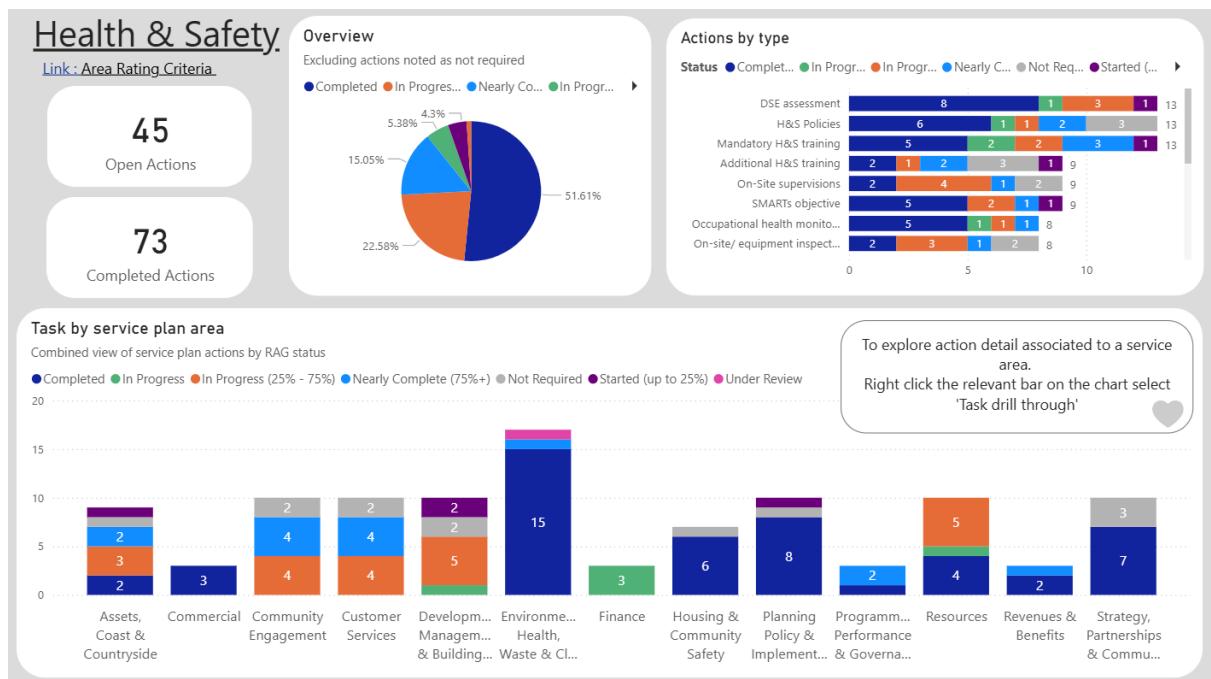
3.4 System Resources

3.4.1 Work to update the outputs of the health and safety reports in light of the restructure is ongoing. A monthly highlight report submitted to the SLT has been agreed as providing the appropriate level of governance supported by routine attendance of the Corporate Health and Safety Manager to SLT.

3.4.2 Service plan targets for the directorates have now been rationalised from ten to six focus areas. Whilst the same coverage has been maintained, it is felt that a smaller number of target areas will be more focussed and will simplify the reporting process. The targets will go live from April 2026 and will be paired with the directorates created by the 'Transforming Together' process.

Department defined performance against each assigned Health and Safety activity

*Activities and reporting are under review as part of 'Transforming Together' Phase 2 and Service Plan re-set activity 2.



Service Plan Performance Data Captured 5-5-2026.

3.5 Fire Risk Assessments

3.5.1 Progress has been made in a number of areas concerning the main offices. Meetings have been held with the author of the Fire Risk Assessments with the aim of clarifying any outstanding items and to determine the sufficiency of mitigative measures that have been implemented or are proposed. A survey of the fire doors was conducted and discussions regarding a type 4 compartmentation survey are ongoing. Work at the depots is still required but progress is being made. Some additional fire response precautions are now included on health and safety inspections that nominated staff perform on a routine basis.

3.6 Policies and Procedures

3.6.1 Outstanding corporate policies and procedures for health and safety have now been reviewed. Some require additional details or arrangements to be agreed. The Transport (driving at work) and Lone Working procedures are awaiting sign-off from SLT, whilst that for Legionella Control requires responsibilities to be assigned to nominated officers.

3.7 Health and Safety Inspections

3.7.1 No mini-audit inspections were conducted in the period. Discussions were held with the Director of Strategy and Improvement and Head of Health and Wellbeing exploring any potential improvements to the oversight of health and safety at MDC leisure assets including routine due diligence reporting.

3.8 Legionella

- 3.8.1 Routine work of the council's contractor continues. A new contract will be required later in the year. Items concerning legionella, identified as part of the mini-audit inspections, have been raised in their respective reports. A review of the legionella procedure has highlighted that nomination of officers for legionella responsibilities is required.

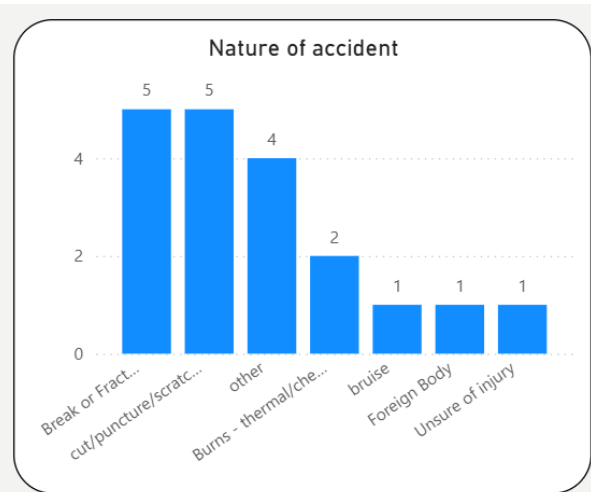
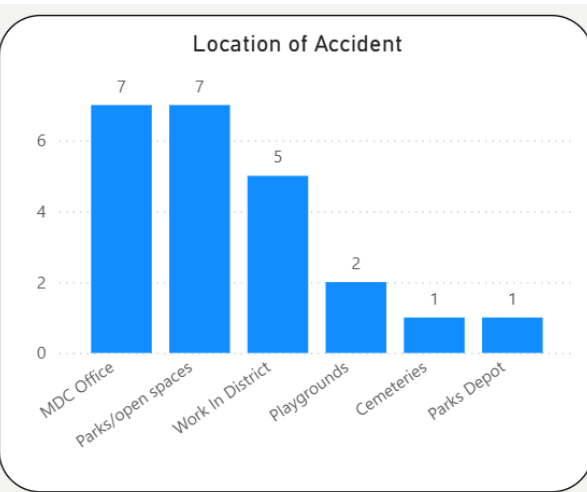
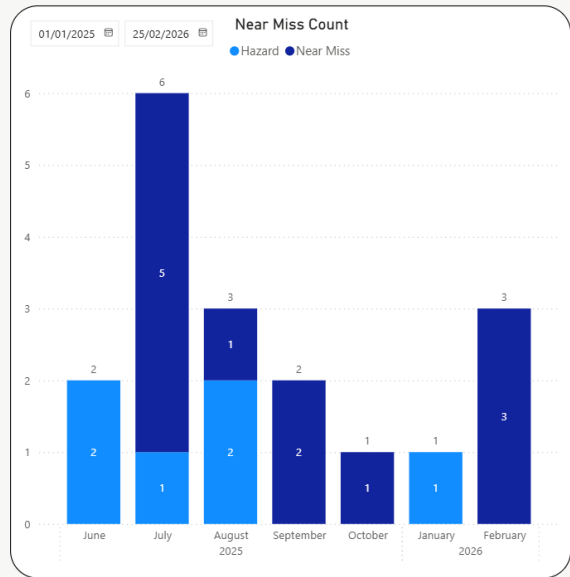
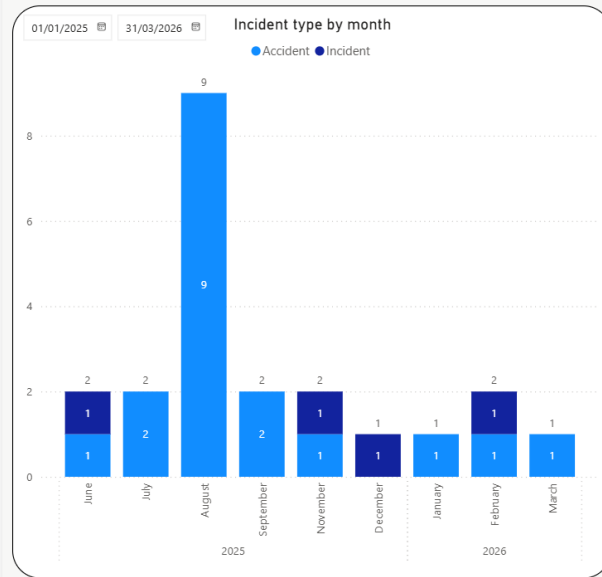
3.9 Training

- 3.9.1 Fire Marshal and Lone Working training was held in the period to accommodate new staff and increase the provision of those competent to undertake these roles. Ladder user and inspection courses were also held in recognition that working from ladders is the most common form of 'working at height' undertaken at the Council. Driver familiarisation sessions, for those staff who drive Council-owned vehicles were held with the Safer Essex Road Partnership. This was done to accommodate the revised driving at work procedure and corporate risk assessment.
- 3.9.2 Training sessions for the newly formed SLT and SMT have been procured and are intended to be delivered shortly. Partnering with a firm of consultants who have a wealth of experience in cultural and behavioural safety, the training is intended to focus on the roles leadership play in supporting good health and safety and the responsibilities they have in ensuring the necessary safety arrangements are in place. This will require some development with the Corporate Health and Safety Manager to ensure that it meets the specific needs of the authority.
- 3.9.3 Work on administering the health and safety e-learning modules has been temporarily paused whilst a new training platform ('Boxfish') is introduced across the Council. Modules will require conversion to the new system by ICT.

3.10 Accident-Near Miss Reporting

- 3.10.1 The period coincided with the colder winter months when typically, lower rates of accident and incident reporting are observed. One accident involved a member of staff whilst two involved members of the public. Hazard and near-miss reporting showed a reasonable number of events reported, particularly in February. This was helped due to the vigilance of Parks staff who generally adopt a proactive approach towards health and safety. One near miss was investigated due to its potential severity.

Health & Safety Reporting



3.11 Health and Safety Audit

3.11.1 There were two audit actions that required completion in the period (see below). These were both completed. All actions are now closed.

Risk	Item	Status
R5 (Red)	An inspection schedule frequency should be agreed with each service area head and with the Health and Safety team.	Closed. An inspection schedule has been agreed and templates to support the process created. Inspections have commenced using hard-copy forms, whilst an electronic report form is being tested.
R1 (Amber)	All of the out-dated supporting guidance documents identified in the Health and Safety Policy/Procedure Index should be reviewed and updated, ensuring they align to current statutory requirements and the Council's procedures.	Closed. Each health and safety procedure has an agreed working group and team lead'. The group and lead are responsible for review of the procedure. Documents have now been reviewed. Some are awaiting sign-off, whilst some require details of working practices to be confirmed by work teams.

3.12 **Priorities going forward**

- 3.12.1 The priorities for the next quarter will be to ensure that the rationalised health and safety targets are appropriately embedded, and that supporting documentation and reporting forms reflect the new corporate structure. A new mechanism for discussing health and safety with senior managers will need to be established in order to replace the previous health and safety meetings. Lone working devices will require roll-out and arrangements for training of the SLT and SMT finalised.

4. **CONCLUSION**

- 4.1 Accidents, near misses and incidents of unacceptable behaviour during Q4 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 Some roles and responsibilities for health and safety have changed along with organisational structure as a result of the 'Transforming Together' process. The Corporate Health and Safety Manager will continue to work with the SLT to ensure a smooth transition, ensuring that health and safety performance can be captured sufficiently and health and safety improvements continue at a suitable pace.
- 4.4 The final audit actions were completed. Work will continue to ensure the measures put in place are maintained sufficiently moving forwards.

5. **IMPACT ON PRIORITIES AS SET OUT IN THE CORPORATE PLAN 2023 - 2027**

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 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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