



Health  
AND Safety  
Matters

# Health and Safety Annual Report 2024/25



monmouthshire  
sir fynwy



# CONTENTS

<b>Contents</b>	<b>1</b>
<b>Introduction</b>	<b>2</b>
<b>Progress update</b>	<b>3</b>
<b>At a glance - Health &amp; Safety Infographic</b>	<b>5</b>
<b>Managing health and safety</b>	<b>6</b>
<b>Accidents and incidents</b>	<b>7</b>
<b>RIDDOR notifications</b>	<b>11</b>
<b>Sickness absence</b>	<b>14</b>
<b>Occupational health</b>	<b>17</b>
<b>Health and safety training</b>	<b>20</b>
<b>Regulatory oversight</b>	<b>25</b>
<b>Insurance claims</b>	<b>26</b>
<b>Providing assurance</b>	<b>28</b>
<b>National priorities</b>	<b>30</b>
<b>Looking forward</b>	<b>31</b>
<b>Appendix 1 - Health &amp; Safety Risk Register</b>	<b>32</b>
<b>Appendix 2 - RIDDOR notifications</b>	<b>52</b>

# INTRODUCTION

Monmouthshire County Council is committed to fostering a safe, healthy, and supportive environment for its employees, service users, pupils, and all those impacted by its operations. This report highlights the progress made in 2024/25 to strengthen our health and safety culture, reduce risk, and enhance wellbeing across the organisation.

Key achievements include the appointment of a dedicated Health and Safety Advisor for schools and the strategic realignment of the Senior Health and Safety Advisor to the Corporate team, moves that have significantly increased our capacity for proactive support and resilience. These changes were informed by a comprehensive review, and have already begun to address previously identified risks, laying the foundation for a safer and more responsive organisation.

Our Health and Safety Network continues to grow stronger, with regular virtual meetings fostering collaboration and consistency across directorates. In response to feedback from the Health and Safety Executive (HSE), we successfully launched a targeted asbestos management training programme, delivered in partnership with a neighbouring authority. The initiative was well received, with the HSE Inspector commending the depth of knowledge demonstrated by our managers.

The increase in working days lost through sickness absence across our organisation, particularly those attributed to psychological illness is a matter for concern. At present, we are unable to reliably distinguish from our sickness reports that which is work-related and that which is not. Addressing this challenge will be a key focus for 2025/26, as we seek to better understand the underlying causes and implement effective interventions to support our workforce.

Looking ahead to 2025/26, we are optimistic. With increased capacity and a clear set of priorities, we are well-positioned to embed a robust health and safety culture, raise awareness, and deliver tangible improvements that protect and empower our workforce and communities.

# PROGRESS UPDATE

- In 2023/24 we reviewed capacity and capability in our Corporate Health and Safety team and implemented a managed move to provide additional capacity and resilience.
- We further strengthened health and safety support and guidance to our schools, appointing a Schools Health and Safety Advisor.
- We successfully piloted a new e-voucher scheme for DSE user eye tests.
- We developed and piloted the use of a Schools Security Audit Checklist. By identifying and addressing potential threats, we can create a secure and nurturing environment that supports the growth and development of our learners.
- We developed and piloted an audit checklist to assess the effectiveness of arrangements for managing the risks children face from vehicles when walking on and immediately outside their school sites at drop off and pick up times.
- We provided health and safety input to the Corporate Induction programme and Managers Reset programmes
- We developed a health and safety risk register for the Authority - see Appendix 1.
- In collaboration with a neighbouring authority, we commenced the roll out of a comprehensive training programme for managers, including headteachers, with responsibility for buildings which contain asbestos.
- In response to increasing incidents of violence towards our employees we developed and delivered Violence and Aggression training for front line officers across the authority.
- We achieved demonstrable health and safety improvements at some of our depots and work will continue in 2025/26 to secure further improvements.
- We have worked to further reduce the risk to operatives associated with waste collection on potentially hazardous routes.

- The Council's Health Surveillance Programme is back on track after falling slightly behind last year.
- We have refined our approach to accident/incident investigation which means we are better able to identify trends, contributory factors and root causes.

**Good progress has been made in strengthening our arrangements for managing health and safety in 2024/25. The new officer structure introduced in January 2025 provides a firm foundation for the future and the capacity to enable the service to develop a more proactive approach.**

# AT A GLANCE



## Health & Safety 2024/25



**188**

Work-related  
accidents/incidents reported  
online.  
(289 reported in 2023/2024)



**16**

RIDDOR notifications  
(25 reported in 2023/2024)

**93**

Staff attended health  
surveillance clinics



**59**



In-house First Aid  
courses



**35,340**

Number of working days lost  
through sickness absence.

33,796 in 2023/2024



**12.7**

Days lost through  
sickness per FTE

11.8 in 2023/2024

**29**

Staff referred to  
occupational  
health for work  
related stress



In house Management  
of Aggression &  
Personal Safety  
Awareness courses



**8**



**39%**

Musculo skeletal  
disorders down (last 7  
years)



Psychological illness up  
(last 8 years)

**54%**

# MANAGING HEALTH AND SAFETY

The Council's arrangements for managing health and safety are set out in our Corporate Health and Safety Policy, with our Chief Executive having ultimate responsibility for the health and safety of employees and others who may be affected by our undertakings.

Strategic management of health and safety has been delegated to our Deputy Chief Executive (who is accountable to Cabinet for the authority's health and safety performance) and to other members of the Strategic Leadership Team in respect of services under their control.

Our Cabinet Member for Resources takes an active interest in health and safety, meeting regularly with the Deputy Chief Executive and Corporate Health and Safety Manager to maintain a consistent focus on emerging priorities. This regular engagement helps ensure timely action and alignment with our strategic goals.

Directorates with nominated health and safety leads have demonstrated strong leadership, establishing effective arrangements and fostering a culture of collaboration. These leads work closely with the Corporate Health and Safety Manager and actively contribute to the Corporate Health and Safety Group, ensuring Directorate-level insights inform Council-wide improvements.

Where these leads are in place, communication is strong and proactive, with regular meetings helping to maintain momentum and drive continuous improvement. The Corporate Health and Safety Group, which meets quarterly and includes Trade Union representation, provides a valuable forum for shared learning, partnership working, and collective problem-solving.

Together, these arrangements are helping to embed a more resilient and responsive health and safety culture across the organisation - one that supports our people, protects our services, and delivers better outcomes for our communities.

**We have strengthened our Health and Safety Network providing a firm foundation for the future.**

**In 2025/26 we will establish Directorate Health and Safety Groups in those Directorates where they do not already exist.**

**We recognise the need to strengthen our corporate health and safety systems and processes, improve the quality of information and data and establish more effective arrangements for health and safety monitoring, inspection and audit. This will provide our Strategic Leadership Team with the necessary assurances and enable us to demonstrate continual improvement.**

# ACCIDENTS & INCIDENTS

Monmouthshire County Council remains committed to continuous improvement in health and safety performance, with a strong focus on creating a safer and healthier workplace for all. Our proactive approach to accident and incident management is central to reducing work-related harm and fostering a culture of learning and prevention.

## Reporting and Investigation Process

Managers are empowered to report and investigate all work-related accidents and incidents using structured reporting proformas, some of which have been digitalised

This process supports the identification of root causes and contributing factors, enabling the implementation of corrective actions to prevent recurrence and improve working conditions.

Investigations are proportionate to the severity of the incident, with support provided by Directorate Health and Safety Leads and the Corporate Health and Safety Team.

For serious incidents, the Corporate Health & Safety Manager leads the investigation to ensure a thorough and consistent response.

All reports are reviewed by the Corporate Health and Safety Team to:

- Confirm work-related status
- Ensure investigations are completed appropriately
- Meet statutory reporting requirements under RIDDOR

This oversight ensures compliance and supports timely, targeted interventions.

## Incident Overview – 2024/25

A total of 263 incidents were reported via the Council's online system. Following review, 188 incidents were confirmed as work-related, a welcome reduction in the 289 reported in 2023/23, and 75 incidents were deemed non-work-related and managed locally with appropriate communication

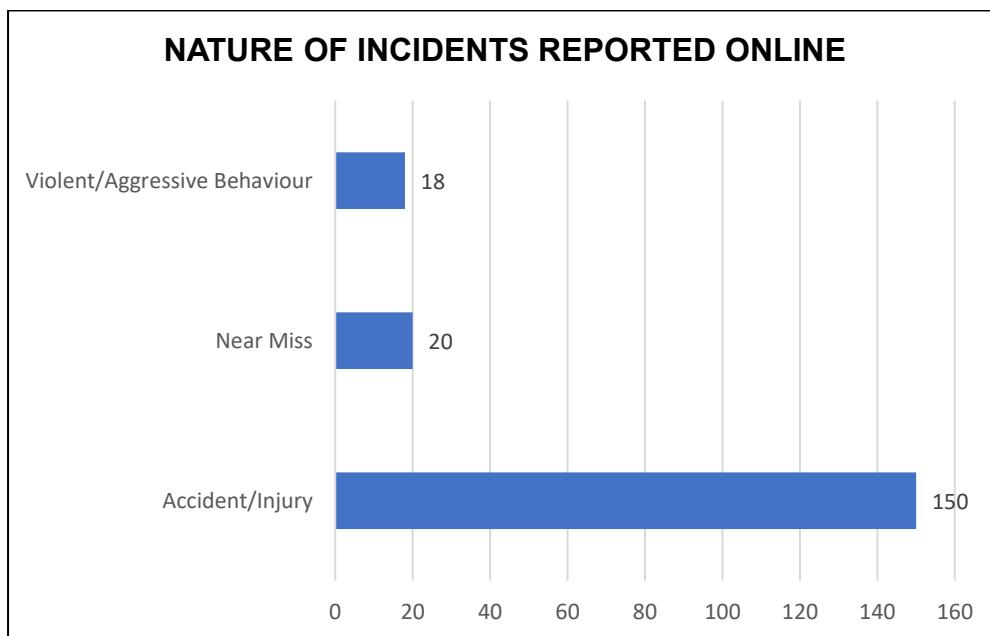
Non-work-related incidents included sports injuries and falls in care settings where environmental or supervisory factors were not involved.

The Communities and Place Directorate reported the highest number of work-related incidents (100), followed by Social Care, Safeguarding and Health (59). These

figures reflect strong engagement with the reporting process and provide valuable insights for future improvements.

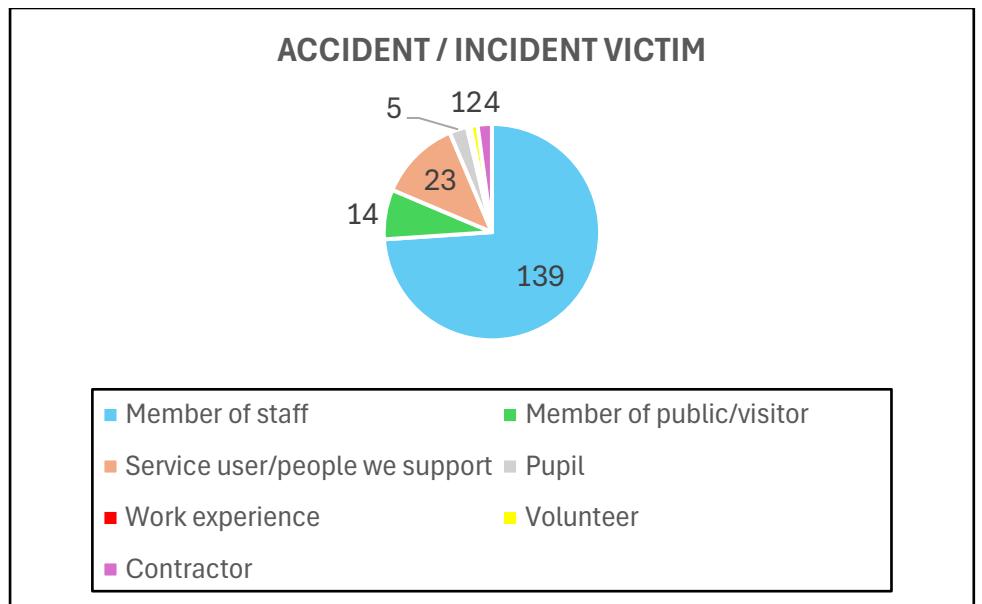
## Incident Types

Most of the incidents reported online were accidents/injuries (**150**), although there were **18** cases of violent/aggressive behaviour and **20** near misses.



## Victim Profile

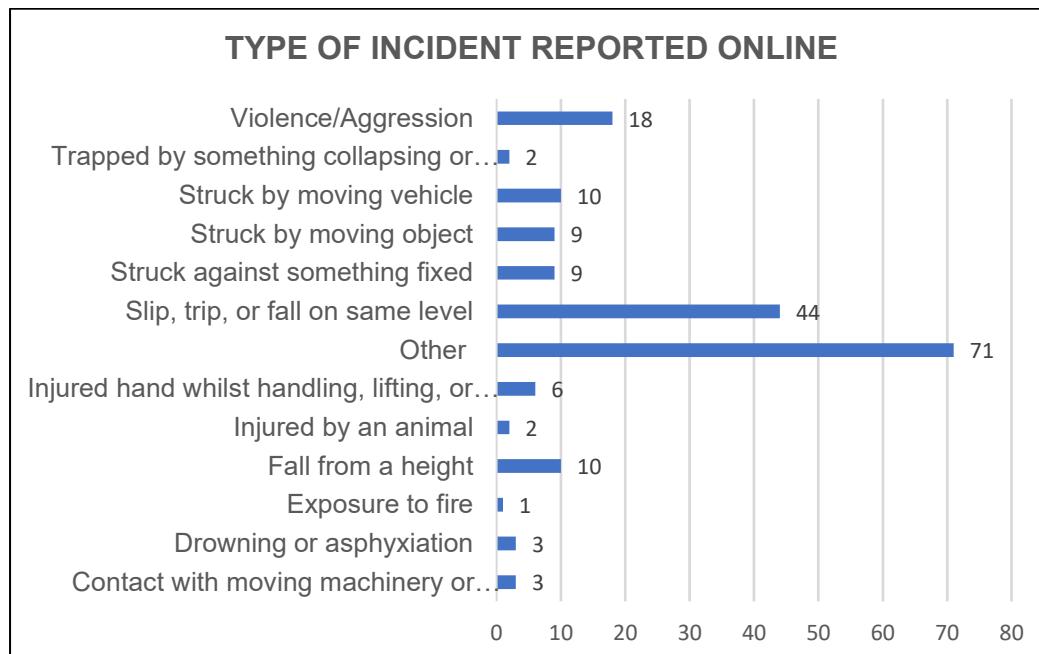
In 74% (139 cases) of work-related accidents/incidents reported online the victim was a member of staff:



## Accident categories

There was significant variation in the types of accidents reported. The most common were:

- Slips, trips, or falls on the same level (23%)
- Other (38%) – a broad category capturing diverse incidents



## Violence and Aggression in Schools

In addition to incidents reported via the Council's online system, schools reported:

- 145 incidents of violence/aggression toward school employees
- 15 work-related accidents/incidents/near misses

Incidents of violence and aggression in schools are increasing, reflecting a national trend. In March 2025, the NASUWT published [Violence and Aggression in Schools](#), highlighting that:

- Violent incidents in schools have more than doubled in the last three years
- 35.5% of teachers experienced physical abuse or violence from learners in the past year
- 92% experienced verbal abuse
- The crisis may be contributing to increased teacher absences due to poor mental health.

## Priorities for 2025/26

While improvements have been made in accident and incident reporting, further work is required to enhance data quality, particularly in relation to violent and aggressive behaviour, where underreporting remains an issue, especially in schools where the reporting process has not yet been digitalised.

In 2025/26, the Council will prioritise:

- Strengthening reporting and investigation processes
- Improving support for employees affected by violence and aggression at work
- Enhancing data capture and analysis to inform targeted interventions

**By fostering a culture of accountability, learning, and continuous improvement, we are making meaningful progress toward a safer and more resilient organisation. In 2025/26 we will be working to ensure employees subject to work related violence and aggression are more effectively supported.**

# RIDDOR NOTIFICATIONS

Some workplace accidents/incidents are notifiable to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) and there are strict timescales within which notifications must be made.

The purpose of a RIDDOR is to inform the HSE that a serious work-related accident or incident has taken place. This allows the appropriate enforcing authority to respond and ensure compliance with health and safety law. Employers, the self-employed, and people in control of work premises are responsible for submitting RIDDOR reports.

The following injuries are reportable under the RIDDOR Regulations when they result from a **work-related accident**:

- the death of any person
- specified injuries to workers
- injuries to workers which result in them being incapacitated for more than 7 consecutive days immediately following the day of the accident
- non-fatal injuries to people other than workers (such as customers or volunteers) which result in them being taken directly to hospital for treatment

## Occupational diseases

Employers and self-employed people must report the diagnosis of certain occupational diseases, where these are likely to have been caused or made worse by their work.

## Dangerous occurrences

A dangerous occurrence is one which 'arises out of or in connection with work' and could risk harm to others. Not all of these events need to be reported.

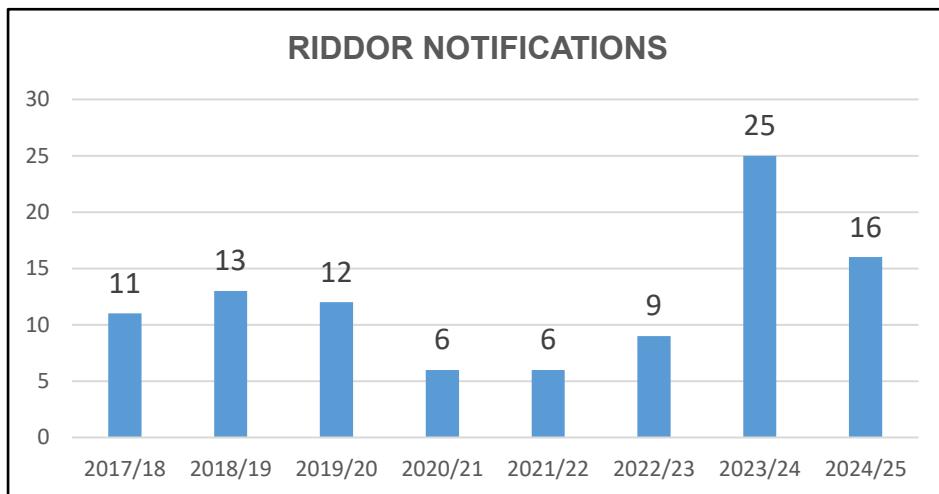
## Gas incidents

Distributors, fillers, importers and suppliers of flammable gas must report incidents in connection with that gas, where a serious incident has occurred.

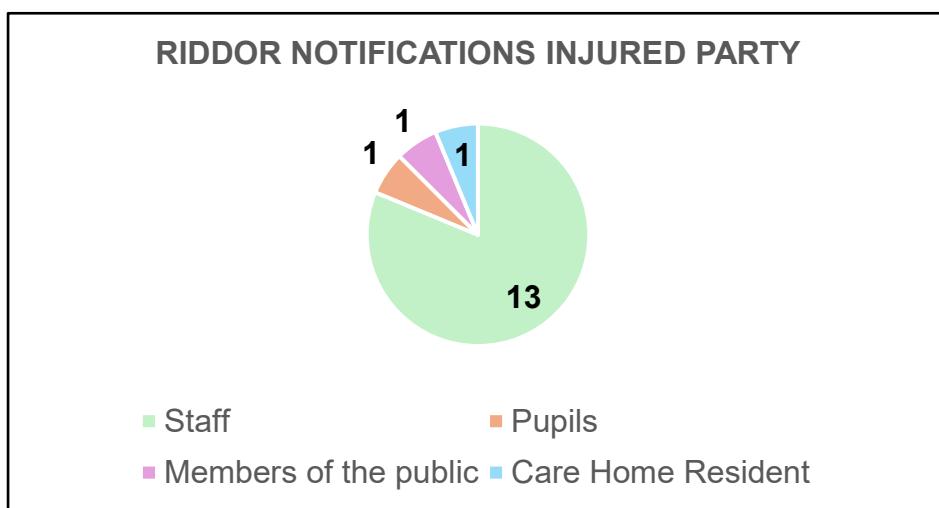
RIDDOR notifications are submitted online by our Corporate Health & Safety Team following discussion with the relevant manager. Further information is available at the link below:

<https://www.hse.gov.uk/riddor/key-definitions.htm>

In 2024/25 the Council reported 16 accidents/incidents to the HSE under RIDDOR compared with 25 in the previous year. Details of these, together with subsequent remedial actions to prevent a recurrence are provided in Appendix 2.

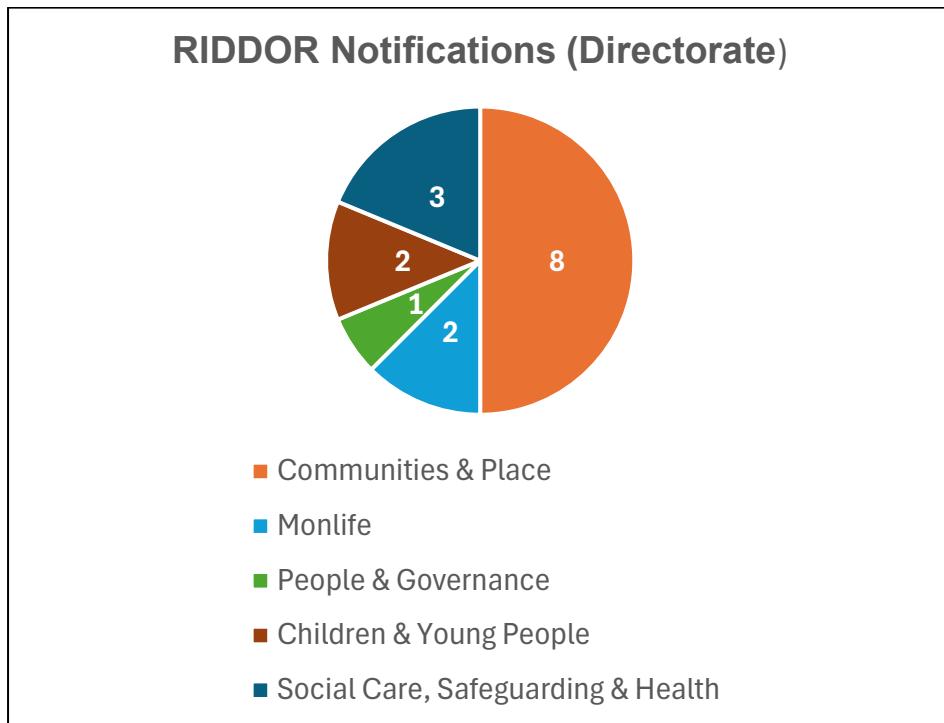


Thirteen of the RIDDOR notifications related to employees, of which three had sustained fractures and a further 10 had reported more than 7 consecutive days off work as a result of their injuries. The remaining three RIDDOR notifications related to injuries to an adult in our care (1), a pupil (1) and a member of the public (1).



Slips, trips and falls were the cause of eight of the RIDDOR notifications relating to employees.

The chart below illustrates RIDDOR notifications by Directorate with Communities and Place (8) reporting the highest number, followed by Social Care, Safeguarding & Health (3).



Whilst none of the notifiable accidents/incidents were subject to further investigation by the HSE, we carried out our own investigations and used the learning to implement changes to prevent recurrences.

**Although the number of RIDDOR notifications was down on the previous year, they are still higher than each of the previous six years. This could be the result of increased awareness of the reporting requirements.**

**As a result of work to digitalise our processes, confidence in the quality of our data and processes relating to RIDDOR notifications is high and timely notifications are made to the HSE.**

# SICKNESS ABSENCE

Sickness absence is an inevitable aspect of working life, with employees occasionally requiring time off due to physical or mental health issues. It is essential that both aspects of health are treated with equal importance. According to the Office for National Statistics, an estimated 148.9 million working days were lost due to sickness or injury across the UK in 2024, equating to an average of 4.4 days per worker. More working days were lost by workers in the public sector than the private sector, with **5.9** working days lost per worker in local government.

Within our organisation, a total of 35,340 working days were lost to sickness absence during 2024/25. This equates to **12.68** lost working days per full-time equivalent (FTE) employee, compared to 11.76 in 2023/24 and 12.48 in 2022/23. Of these, **66.2%** were attributed to **long-term** absence and **33.8%** to **short-term** absence.

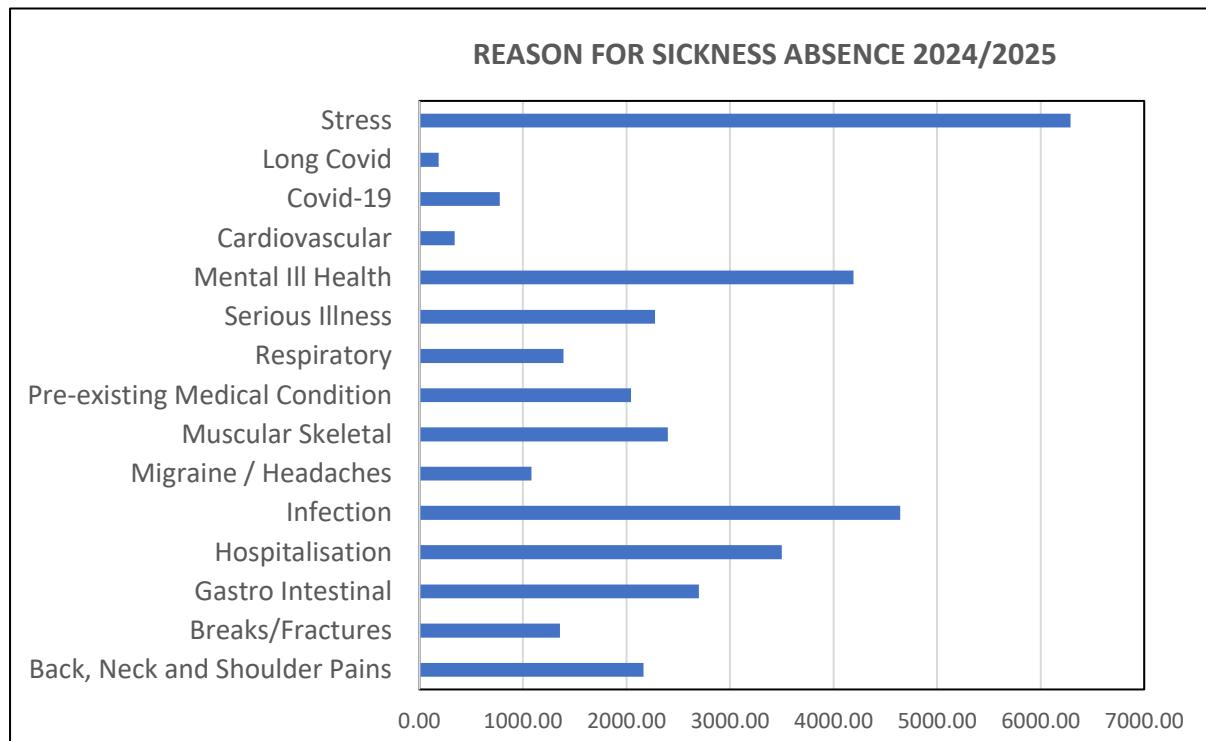
The following table shows the number of lost working days per FTE by Directorate.

NUMBER OF LOST WORKING DAYS PER FTE BY DIRECTORATE	
2024/25	
<b>Chief Executives</b>	<b>6.00</b>
<b>Children &amp; Young People</b>	<b>6.13</b>
<b>Communities &amp; Place</b>	<b>16.16</b>
<b>Law &amp; Governance</b>	<b>2.62</b>
<b>Monlife</b>	<b>9.84</b>
<b>Resources</b>	<b>7.24</b>
<b>Schools</b>	<b>10.21</b>
<b>Social Care, Safeguarding &amp; Health</b>	<b>17.58</b>
<b>Whole Authority</b>	<b>12.68</b>

Directorates with larger headcounts and frontline services tend to report higher levels of sickness absence per FTE.

## Primary Causes of Sickness Absence

The leading cause of absence in 2024/25 was psychological illness, including mental ill health and stress. This was followed by infection and hospitalisation. The breakdown of sickness absence by category is as follows:



Psychological absence accounted for 10,479 lost working days, an increase from 9,015 in 2023/24 and 8,450 in 2022/23. This category now represents 29.7% of all sickness absence, up from 26.7% and 23.5% in the previous two years respectively.

The overall upward trend in psychological absence is shown below:



## Work Related Sickness Absence

Although we record detailed information about sickness absence, our reports do not currently enable us to identify that which is work related with sufficient confidence. We will be prioritising work in 2025/26 to enable us to report work related sickness and target suitable interventions to secure improvements as appropriate.

## Financial and Operational Impact

The high level of sickness absence presents a significant concern, not only due to direct costs but also because of indirect impacts, including:

**Replacement labour:** Temporary staff or agency cover

**Overtime payments:** Additional hours for existing staff

**Administrative burden:** HR and managerial time spent managing absences

**Training costs:** For temporary replacements

**Service quality:** Potential decline in customer satisfaction

**Team morale:** Reduced productivity among remaining staff

## Planned Actions for 2025/26

To address the increasing burden of sickness absence, the following strategic actions will be prioritised:

- Strengthening absence management processes, including a review of our Sickness Absence Management Policy
- Enhancing mental health support
- Promoting physical health initiatives

**We recognise that sickness absence is a significant and increasing financial burden on the authority and in 2025/26 we will work to strengthen our sickness absence management processes.**

**We will also prioritise efforts to better identify and address work-related sickness absence. Improved collaboration between Corporate Health and Safety, HR, Systems and Data teams will be essential to enable targeted interventions.**

**The re-launch of Connect 5 Wellbeing Training in 2025 will empower employees to improve their own mental wellbeing and support others through confident, informed conversations. wellbeing.**

# OCCUPATIONAL HEALTH

In 2024/25, the Council continued its partnership with Insight, our outsourced Occupational Health provider. Insight plays a key role in supporting the management of sickness absence, conducting work-health assessments, and delivering health surveillance programmes.

## Health Surveillance Programme

Working collaboratively with Insight, we delivered a proactive health surveillance programme targeted at employees exposed to specific occupational health risks. Health surveillance is a statutory requirement for individuals who may be exposed to hazards such as:

- Noise
- Vibration
- Dust
- Fumes
- Hazardous substances

These checks are essential even when control measures are in place, as such measures may not always be fully reliable despite regular maintenance, training, and monitoring.

Managers are responsible for identifying employees who require health surveillance.

In 2024/25, 93 employees attended health surveillance clinics. Two levels of surveillance were offered:

**Basic checks:** Audio and Hand Arm Vibration Syndrome (HAVS)

**Safety Critical Medicals**, which included:

<ul style="list-style-type: none"><li>• Audiometry</li><li>• Spirometry</li><li>• Skin assessments</li><li>• HAVS screening</li><li>• Blood pressure monitoring</li></ul>	<ul style="list-style-type: none"><li>• Musculoskeletal evaluation</li><li>• Vision testing</li><li>• Comprehensive medical questionnaire</li></ul>
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It is important to note that health surveillance differs from health monitoring, health promotion, or general health screening. It is specifically designed for workers at risk and serves to:

- Identify necessary actions to prevent harm
- Provide a platform for employees to raise health concerns
- Reinforce health and safety training and education

The health surveillance programme was successfully delivered to target in 2024/25.

## Occupational Noise Assessment

An occupational noise exposure assessment was commissioned during the year which identified elevated noise levels among employees operating glass collection vehicles. Exposure was found to exceed the lower exposure action value, prompting the implementation of enhanced control measures to mitigate the risk of work-related hearing damage.

## Occupational Health Referrals

Insight provides managers with expert occupational health advice and support. In 2024/25, **327** employees were referred to Insight for occupational health assessments. Referral reasons varied, with **29** cases related to work-related stress and **3** cases linked to work-related accidents.



# HEALTH & SAFETY TRAINING

Training is a fundamental component of the Council's health and safety management system. In line with our legal obligations, we are committed to providing employees with appropriate information, instruction, and training to safeguard their health and safety, as well as that of others. This duty is embedded in key legislation, including:

- The Management of Health and Safety at Work Regulations 1999
- The Regulatory Reform (Fire Safety) Order 2005
- Control of Substances Hazardous to Health Regulations 2002
- Control of Asbestos Regulations 2012
- Provision and Use of Work Equipment Regulations 1998
- Personal Protective Equipment at Work Regulations 1992
- Health and Safety (Display Screen Equipment) Regulations

## Training Delivery Methods

Training is delivered through a variety of formats to suit operational needs and learning preferences:

- Formal face-to-face sessions
- Informal, on-the-job instruction
- Written guidance
- E-learning (self-paced)
- Online learning (real-time instruction)
- Verbal instruction

## Key Developments in 2024/25

- The Council focused on improving the capture of training data to identify gaps, share best practice, and promote consistency and efficiency across services.
- Collaboration with a neighbouring authority to deliver Asbestos Awareness and Management of Asbestos training following a review which identified areas for improvement.
- RLSS Trainer Assessor Awards: Three employees were upskilled to deliver lifeguard training and support monthly refresher sessions.

It is anticipated that going forward, more health and safety training will be delivered through e-learning and our Corporate Health and Safety Manager is working closely

with our Corporate Training Team to explore opportunities using *Thinqi*, our new digital learning management system. The benefits of e-learning include:

- Flexibility and self-paced learning
- Cost efficiency
- Consistency in delivery
- Improved time management and motivation
- Scalability and personalised learning
- Enhanced analytics and reporting

## Corporate Training Team Delivery (2024/25)

The following health and safety courses were delivered centrally, in addition to service-specific training:

<b>Title</b>	<b>Number of courses</b>
First Aid at Work	3
Emergency First Aid at Work	23
Paediatric First Aid	2
Emergency Paediatric First Aid	3
Management of Aggression & Personal Safety Awareness	3
Fire Evac Chair	5
Manual Handling Awareness	10
Fire Safety Awareness ( <i>Thinqi</i> )	1517 members of staff
Fire Warden	4
L2 Health & Safety in the Workplace (Highfield)	2
Legionella Awareness	2
Risk Assessment Awareness/Dynamic Risk Assessment for Drivers	10
Ladder Safety/Working at Height	5
COSHH	4

Operations related training (Number of courses)
<ul style="list-style-type: none"> <li>• L1 H&amp;S in a Construction Environment = 5 days (this isn't a course; a group of delegates complete a test paper only)</li> <li>• Highways Induction = 3</li> <li>• Reversing Assistant = 5</li> <li>• Traffic Management = 43</li> <li>• Vehicle Restraint Systems = 27</li> <li>• Telehandler = 7</li> <li>• Abrasive Wheels = 3</li> <li>• Load Security &amp; Safe Trailer Hitching = 6</li> <li>• Chainsaw/Strimmer/Brushcutter/Hedgecutter/Woodchipper = 8</li> <li>• Excavator = 4</li> <li>• Pesticides = 1</li> <li>• Pressure Washer (depot wash down bays) = 23</li> <li>• Winter Service Operations = 11</li> <li>• Hand Arm Vibration Syndrome (HAVS) = 4</li> <li>• Forklift Truck = 9</li> </ul>



**Social Care & Health Directorate  
Health & Safety Training**

The Mon Workforce Development Team delivers tailored health and safety training to social care and health employees, foster carers, micro carers, third sector organisations, and partners. This training is aligned with Social Care Wales Workforce Development Programme (SCWWDP) priorities and is provided free of charge.

Training is delivered by one full-time and two part-time in-house trainers, supported by subject matter experts from the Council and Aneurin Bevan University Health Board. Sessions are held at Innovation House, across weekdays, evenings, and weekends, with access to specialist equipment including hospital beds, hoists, and first aid kits.

A total of **1,833** individuals received health and safety training through this programme:

Course Title	No. of courses	No. of people trained
<b>Face to Face</b>		
Emergency First Aid	19	218
First Aid at Work	3	33
Paediatric Emergency First Aid	6	24
Personal Safety Awareness	5	113
Fire Evacuation	2	38
Fire Warden	2	16
Manual Handling Foundation	17	192
Manual Handling Refresher	21	135
Key Handler 3 day	3	16
Reablement and positive risk taking	6	121
Manual Handling Sitting, Standing, Walking	4	15
Care of Medications	15	281
Food Safety Level 2	4	40
Food Safety Level 3	1	13
Trainer led foster carer H&S learning (various)	18	186
<b>Virtual</b>		
COSHH Awareness	Self-directed	102
Infection Prevention		92
Health & Safety		93
Food Safety Level 2		105

In 2025/26, the Council will re-launch Connect 5 Wellbeing Training, a free programme for sector providers. Its objectives include:

- Empowering individuals to improve their own mental wellbeing
- Building confidence to engage in open conversations about mental health
- Providing suicide awareness and signposting resources

### Looking Ahead to 2025/26

Key priorities for the coming year include:

- Developing a consistent approach to mandatory health and safety training across services
- Expanding the use of the Thinqi learning management system
- Increasing the range of health and safety e-learning modules available

**The Council's digital learning platform provides an exciting opportunity to deliver and manage health and safety training. We will be increasing the range of health and safety e-learning available in 2025/26**

# REGULATORY OVERSIGHT

The health and safety regulator for local authorities in Great Britain, including Monmouthshire County Council is the **Health and Safety Executive (HSE)**. **South Wales Fire and Resue** is the fire safety regulator.

Regulators carry out both **planned** and **reactive** interventions at workplaces to ensure they are safe and may use their enforcement powers to secure improvements. There are strict penalties for non-compliance which can include **unlimited fines** and/or **imprisonment for up to two years**.

In the case of the HSE, they operate a **fee for intervention scheme** whereby they recharge employers for their time if they identify a **material breach**.

## Regulatory Activity in 2024/25

During the reporting period, the Council was subject to further intervention by the HSE following previously identified concerns regarding the management of asbestos risks. Inspections were carried out at:

- **Abergavenny Market**
- **Gilwern Outdoor Centre**
- **Abergavenny Leisure Centre**

The HSE Inspector acknowledged progress since the previous visit but expressed concern regarding the Council's capacity and capability to manage asbestos risks in full compliance with regulatory requirements.

In addition, an unannounced fire safety inspection was conducted by South Wales Fire and Rescue Service at Shire Hall, Monmouth in June 2024. The inspection had a **positive outcome**, with **no areas of non-compliance** identified.

**The Council has developed positive working relationships with both health and safety regulators. Our Corporate Health and Safety Team acts as a single point of contact, ensuring consistent communication and appropriate escalation of issues to the Strategic Leadership Team when necessary.**

**In direct response to HSE feedback, the Council is developing proposals to strengthen the capacity and capability of its Property Services Team, ensuring more effective management of property related health and safety risks going forward.**

# INSURANCE CLAIMS

## Employer's Liability Claims

An **employer's liability claim**, often referred to as a **workplace accident claim**, may arise when an employee or volunteer suffers injury or financial loss due to a work-related incident. To succeed in such a claim, the claimant must demonstrate that the Council was **negligent**, and that this negligence directly caused the incident and resulting harm.

The Council acknowledges its **duty of care** to all employees and volunteers, and takes all reasonable steps to provide a safe working environment. Compliance with health and safety legislation is central to this commitment. Breaches of these regulations can result in serious consequences, including injury and legal liability.

Key employer responsibilities include:

- Providing appropriate and adequate training to ensure safe working practices
- Supplying suitable equipment and personal protective equipment (PPE)
- Maintaining a safe working environment and regularly inspecting equipment
- Implementing and maintaining safe systems of work

Where these duties are not met, the Council may be subject to an employer's liability claim. To mitigate this risk, the Council maintains **comprehensive employer liability insurance** to cover potential compensation costs arising from proven negligence or statutory breaches.

Since 2019, the Council has received **14 employer liability claims**, resulting in **£27,768** in compensation payments. In 2024/25, **one new claim** was received, which remains open. The potential compensation for this case is **£7,250**, subject to change as the case progresses.

## Public Liability Claims

A public liability claim may be made when a member of the public suffers injury in a public space due to alleged negligence. Claimants typically have three years to initiate such claims.

In 2024/25, the Council received 28 public liability claims where potential health and safety shortcomings may have contributed to the incident. To date, £4,993 has been paid in compensation. However, 22 cases remain open, with potential further payments of up to £78,974.

## Learning from Claims

The Council's Principal Insurance and Risk Manager plays a key role in the Corporate Health and Safety Group, supporting a collaborative approach to learning from insurance claims. Through effective communication and data triangulation, we are strengthening our understanding of incidents and improving future risk management.

We recognise the value of learning from both successful and defended claims. Where compensation has been paid, we examine the circumstances to identify improvements. Conversely, where claims have been successfully defended, we use these cases to reinforce the importance of robust health and safety practices and documentation.

**We have effective communication mechanisms in place ensure that lessons learned from insurance claims are shared and acted upon.**

# PROVIDING ASSURANCE

Under the Management of Health and Safety at Work Regulations, all employers are required to have arrangements in place for the effective planning, organisation, control, monitoring, and review of measures to protect people at work.

The Health and Safety Executive (HSE) promotes the **Plan, Do, Check, Act approach** as a best practice framework:

**Plan:** Identify what needs to be done

**Do:** Implement the plan effectively

**Check:** Monitor and evaluate control measures

**Act:** Take corrective action where necessary

This cyclical process supports continuous improvement by:

- Identifying areas for development
- Enabling timely interventions to protect staff and others
- Embedding a culture of ongoing review and improvement

## Internal and Service-Level Monitoring

The Council's Internal Audit Team plays a key role in providing assurance by reviewing health and safety risk assessments and verifying the implementation of control measures where it is appropriate. Findings are reported to senior managers and the Corporate Health and Safety Manager.

In addition, several service areas have developed their own compliance monitoring arrangements, and some have achieved third-party accreditation. However, we acknowledge that in some areas, there is insufficient evidence of formal, planned monitoring. This limits our ability to provide the Strategic Leadership Team with full assurance that health and safety risks are being effectively managed.

## Examples of Assurance in Practice

- **Highways Team:** Maintains exemplary health and safety standards in a high-risk environment. Accredited to ISO 45001, the team is regularly audited by the South Wales Trunk Road Agent (SWTRA) and Welsh Government (WG), and has been commended for its robust systems, site safety practices, and team engagement.
- **Grounds Team:** Achieved SMAS Worksafe accreditation, demonstrating best practice in workplace health and safety.
- **Indoor Playcentre, Monmouth:** Successfully met RoSPA health and safety standards during its annual inspection.
- **Gilwern Outdoor Adventure Centre:** Awarded a licence under the Adventure Activities Licensing Regulations (AALR) 2004.
- **Property Services:** Compliance officers conduct regular inspections of Council properties to verify adherence to health and safety requirements.

It is essential that monitoring activities are not only carried out but also clearly communicated to managers and used to drive improvement. Monitoring must be seen as an input that leads to measurable outcomes, such as improved compliance and a reduction in incidents.

**In 2025/26, we will prioritise the development of a risk-based, more consistent and robust approach to health and safety monitoring and assurance across all Directorates. This work will be informed, in part, by an internal audit of the Property Services compliance function scheduled for the year.**

# NATIONAL PRIORITIES

## National health and safety priorities 2025/26

- **Occupational Lung Disease.**  
This includes managing risks associated with asbestos
- **Legionella Control**  
With a focus on preventing Legionnaires disease particularly in infrequently used water systems or those with a poor history of control
- **Work Related Stress**  
Raising awareness and addressing the impact of work related stress on employee wellbeing
- **Violence and Aggression**  
Mitigating risks to lone workers and customer facing employees
- **Musculoskeletal Disorders**  
Ensuring adequate risk assessments for manual handling activities
- **Noise in the Workplace**  
Focusing on the use of hearing protection and health surveillance
- **Planned Preventative Maintenance**  
Ensuring work equipment is properly maintained

The Corporate Health and Safety team will work to ensure Council priorities for health and safety are aligned with national priorities where this is appropriate. This will protect the Council's interests and ensure areas of most risk are afforded the highest priority.

# LOOKING FORWARD

## Our priorities for 2025/26

- Complete the review of the Council's health and safety policies
- Work closer with HR, Systems and Data colleagues to develop a better understanding of the proportion of sickness absence that is work related
- Explore with colleagues across the organisation strategies for tackling lost working days due to psychological illness
- Develop the Council's online health and safety training offering
- Develop health and safety information on the Hub and explore options for improving access to health and safety information for schools
- Further develop online accident and incident reporting focusing particularly on violence in schools and develop and deliver accompanying training
- More effectively support employees who are subject to violence and aggression at work
- Improve health and safety communications
- Further digitalise health and safety systems and processes
- Establish Directorate Health and Safety Groups in those Directorates where they do not already exist
- Further strengthen arrangements for managing asbestos in Council properties
- Review the Council's arrangements for managing fire risks in its buildings
- Develop proposals for a programme of health and safety assurance audits
- Develop proposals for an Employee Protection Register
- Re-launch Connect 5 wellbeing training
- Strengthen our health and safety performance framework, developing a dashboard of performance indicators that can be monitored through our Corporate Health and Safety Group and regularly reported to enable us to track progress

**The production of this Annual Health and Safety Report has provided the opportunity to reflect on our achievements in 2024/25 and consider our priorities for the year ahead.**

**Additional capacity in the team means we can adopt a more proactive approach and consider how we can most effectively obtain the necessary assurances around the Council's health and safety performance.**

## Health & Safety Risk Register (updated September 2025)

Risk Level (Pre-mitigation)					Risk Level (Post-mitigation)					Target Risk Level
Year	Likelihood	Impact	Risk Level	Risk Score	Year	Likelihood	Impact	Risk Level	Risk Score	Low (4)
2024/25	3	4	High	12	2024/25	3	4	High	12	
2025/26	3	4	High	12	2025/26	2	4	Medium	8	
2026/27	2	4	Medium	8	2026/27	1	4	Low	4	
<b>Mitigating Actions</b>										
Mitigating Action		Responsibility Holder & Timescale	Mitigation action progress							RAG
i) Review Corporate Health and Safety Policy and communicate revised Policy to staff to ensure roles and responsibilities for H&S across the Council are clear and understood.	KT	<ul style="list-style-type: none"> <li>Review by June 2024</li> <li>Consultation June-September 2024</li> <li>Sign off by Chief Executive October 2024</li> <li>Communication of revised Policy March 2025</li> </ul>	Completed							
			Review timetable in place and good progress being made. Draft policies considered by Corporate Health and Safety Group prior to approval by JAG. Work ongoing.							

Where gaps are identified develop new policy documents.	Group September 2024 • Progress in delivering the policy review plan against the timetable to be reported to Corporate H&S Group quarterly		
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Ref	2	Risk	<b>Potential risk that:</b> The Council's arrangements for reporting work- related accidents, incidents (including violence) and near misses are not sufficiently robust which may mean: <ul style="list-style-type: none"> <li>missed opportunities to take action to prevent recurrences</li> <li>unable to learn lessons from accident investigations</li> <li>health and safety risks not being identified and/or appropriate controls being implemented</li> <li>unable to provide accurate information in response to requests for information (FOI's)</li> <li>failure to notify HSE of relevant incidents within statutory timescales</li> </ul>				
Risk Owner	Peter Davies	Strategic objective	Improving arrangements for reporting and investigating work-related accidents and incidents will contribute to ensuring Monmouthshire is a <b>safe place to live</b>	Risk category and appetite level	<b>Risk Categories</b> <ul style="list-style-type: none"> <li>Legal and regulatory</li> <li>People</li> <li>Reputational</li> <li>Governance</li> </ul> <b>Appetite level</b> <ul style="list-style-type: none"> <li>Health &amp; Safety (1)</li> <li>Reputational (2)</li> <li>People (1)</li> <li>Legal &amp; Regulatory (1)</li> </ul>	Terminate/treat/transfer/tolerate	Treat
<b>Reason why Identified</b> Online reporting has been rolled out across all Directorates, with the exception of schools. Until the roll out has been completed there is a reliance on emailing accident reports and maintaining records on spreadsheets. There is evidence of both under and over reporting. There is a need to complete the roll out, increase awareness of the online reporting system and develop training for managers and staff.							

Risk Level (Pre-mitigation)					Risk Level (Post-mitigation)					Target Risk Level
Year	Likelihood	Impact	Risk Level	Risk Score	Year	Likelihood	Impact	Risk Level	Risk Score	Low (4)
2024/25	3	4	High	12	2024/25	2	4	Medium	8	
2025/26	2	4	Medium	8	2025/26	2	4	Medium	8	
2026/27	2	4	Medium	8	2026/27	1	4	Low	4	
<b>Mitigating Actions</b>										
Mitigating Action		Responsibility Holder & Timescale	Mitigation action progress							RAG
i) Work with Digital team to implement necessary modifications to online accident/incident reporting system to reflect structural changes		KT December 2025 (subject to availability of support from Digital team)	Further modifications required to reflect new structures							
ii) Complete the roll out of on-line accident and incident reporting to schools (including violence)		KT December 2025	Work continuing with digital team to develop a more robust solution for schools							
iii) Review and revise Council accident and incident reporting and investigation policy		KT December 2025	Drafted and scheduled for consideration by Corporate Health and Safety Group October 2025							

iv) Develop e-learning on workplace accident, incident and near miss reporting which will be mandatory for all staff	KT December 2024	Development ongoing. Scheduled for completion December 2025	
v) Develop accident/incident investigation training for managers	KT December 2024	Development ongoing. Scheduled for completion September 2025	

Ref	3	Risk	<b>Potential risk that:</b> Arrangements for staff health and safety training are inconsistent and, in some areas, inadequate with the risk of: <ul style="list-style-type: none"> <li>• non-compliance with legislation, Council health and safety policies and guidance</li> <li>• staff sustaining injuries and/or health conditions at work</li> <li>• insurance claims which the Council cannot defend</li> <li>• enforcement action against the Council</li> </ul>										
Risk Owner	Peter Davies		Strategic objective	Adopting a more consistent approach across the Authority to health and safety training will contribute to ensuring Monmouthshire is a <b>safe place to live</b>	Risk category and appetite level	<b>Risk Categories</b> <ul style="list-style-type: none"> <li>• Legal and regulatory</li> <li>• People</li> <li>• Reputational</li> <li>• Governance</li> </ul> <b>Appetite level</b> <ul style="list-style-type: none"> <li>• Health &amp; Safety (1)</li> <li>• Reputational (2)</li> <li>• People (1)</li> <li>• Legal &amp; Regulatory (1)</li> </ul>		Terminate/treat/transfer/tolerate	Treat				
<b>Reason why Identified</b>													
The provision of health and safety training is a legal requirement													
<b>Risk Level (Pre-mitigation)</b>					<b>Risk Level (Post-mitigation)</b>								
Year	Likelihood	Impact	Risk Level	Risk Score	Year	Likelihood	Impact	Risk Level	Risk Score	Low (4)			
2024/25	3	4	High	12	2024/25	2	4	Medium	8				
2025/26	2	4	Medium	8	2025/26	1	4	Low	4				
2026/27	1	4	Low	4	2026/27	1	4	Low	4				
<b>Mitigating Actions</b>													

Mitigating Action	Responsibility Holder & Timescale	Mitigation action progress	RAG
i) Develop and implement mandatory H&S awareness and Fire Safety awareness training for all staff.	KT September 2024	Fire safety e learning developed and available on Thinqi	
ii) Source and roll out health and safety training for leaders and senior managers	KT March 2026	NEBOSH HSE <i>Certificate in Health and Safety Leadership Excellence</i> has been identified as suitable training. This training is available online. Decision around funding and further options to be explored.	
iii) Carry out a survey to explore current health and safety training provision across the Council, assess adequacy and opportunities for cost savings, highlight good practice, identify any gaps and make appropriate recommendations	KT December 2025	Survey completed. Good practice and some significant gaps identified. Report with recommendations to be considered by Corporate Health and Safety group January 2026	
iv) Having regard to iii) above develop a health and safety training strategy and plan	KT March 2026		

Ref	4	Risk	<b>Potential risk that:</b> <p>The systems and processes in place to gain assurance around health and safety are not sufficiently robust across the Council. The HSE has produced Guidance (HSG65) <i>Managing for Health and Safety</i> which advocates a Plan. Do, Check, Act approach. Monitoring and reporting are important elements of health and safety management and, acknowledging that 'paperwork' on its own is not a good performance measure, arrangements should be in place to assess how well risks are being controlled in practice. In some circumstances health and safety inspections or audits are necessary to obtain the evidence necessary to provide this assurance. Failing to manage health and safety in accordance with HSG65 could mean that the Council is unable to demonstrate that it is doing enough to comply with the law, specifically the duty under Regulation 5 of the Management of Health and Safety Regulations 1999 which states:</p> <p><i>Every employer shall make and give effect to such arrangements as are appropriate, having regard to the nature of his activities and the size of his undertaking, for the effective planning, organisation, control, <b>monitoring</b> and review of the preventive and protective measures.</i></p>							
Risk Owner	Peter Davies		Strategic objective	Improving the Council's arrangements for monitoring its health and safety performance will contribute to ensuring Monmouthshire is a <b>safe place to live</b>	Risk category and appetite level	<b>Risk Categories</b> <ul style="list-style-type: none"> <li>• Legal and regulatory</li> <li>• People</li> <li>• Reputational</li> <li>• Governance</li> </ul> <b>Appetite level</b> <ul style="list-style-type: none"> <li>• Health &amp; Safety (1)</li> <li>• Reputational (2)</li> <li>• People (1)</li> <li>• Legal &amp; Regulatory (1)</li> </ul>	Terminate/treat/transfer/tolerate	Treat		
<b>Reason why Identified</b>										
There is a legal requirement (Reg. 5 Management of Health and Safety at Work Regulations 1999) to put in place arrangements to monitor and review health and safety preventive and protective measures.										

Risk Level (Pre-mitigation)					Risk Level (Post-mitigation)					Target Risk Level
Year	Likelihood	Impact	Risk Level	Risk Score	Year	Likelihood	Impact	Risk Level	Risk Score	
2025/26	4	4	High	16	2025/26	4	4	High	16	
2026/27	*	*	*	*	2026/27	*	*	*	*	
2027/28	*	*	*	*	2027/28	*	*	*	*	

*\*The risk levels pre and post mitigation are yet to be determined for future years as the mitigating actions planned for 2024/25 will provide evidence of the adequacy of current arrangements but not in themselves reduce the risk. Implementation of any recommendations will reduce the risk.*

Mitigating Actions			
Mitigating Action	Responsibility Holder & Timescale	Mitigation action progress	RAG
i) Undertake a health and safety assurance audit to identify current arrangements in place across the Council to monitor and report health and safety performance.	KT April 2025	High level review completed which identified some good practice but also some significant gaps.	
ii) Having regard to i) above, assess the adequacy of current arrangements and make recommendations for improvement as necessary, having regard to capacity and capability across the Council	KT December 2025	Work to develop recommendations for improvement ongoing. Capacity in Corporate H&S increased to provide central resource for assurance function. Preliminary discussion with internal audit about proposal for H&S assurance in schools. To be informed by internal audit of Compliance function in Property Services. Revised completion date December 2025.	

Ref	5	Risk	Potential risk that: Controls to protect the health, safety and welfare of lone workers are either not in place or not being effectively implemented across some services which compromises staff safety									
Risk Owner	Peter Davies		Strategic objective	Implementing effective controls to protect the health and safety of lone workers will contribute to ensuring Monmouthshire is a <b>safe place to live</b>	Risk category and appetite level	<b>Risk Categories</b> <ul style="list-style-type: none"> <li>• Legal and regulatory</li> <li>• People</li> <li>• Reputational</li> <li>• Governance</li> </ul> <b>Appetite level</b> <ul style="list-style-type: none"> <li>• Health &amp; Safety (1)</li> <li>• Reputational (2)</li> <li>• People (1)</li> <li>• Legal &amp; Regulatory (1)</li> </ul>		Terminate/treat/transfer/tolerate	Treat			
<b>Reason why Identified</b>												
The risks associated with lone working and the need for improved controls has been raised by staff. The Council has a legal duty to ensure workers are safe.												
Risk Level (Pre-mitigation)					Risk Level (Post-mitigation)					Target Risk Level		
Year	Likelihood	Impact	Risk Level	Risk Score	Year	Likelihood	Impact	Risk Level	Risk Score	Low (4)		
2025/26	3	4	High	12	2025/26	2	4	Medium	8			
2026/27	2	4	Medium	9	2026/27	1	4	Low	4			
2027/28	1	4	Low	4	2027/28	1	4	Low	4			

Mitigating Actions			
Mitigating Action	Responsibility Holder & Timescale	Mitigation action progress	RAG
i) Review and revise as appropriate the Council's lone working policy.	KT September 2025	Completed and will be considered by JAG September 2025	
ii) Following consultation and sign off, communicate the Council's lone worker policy to staff	KT October 2025	Awaiting sign off	
iii) Identify and roll out suitable lone worker training for staff and managers	KT October 2025	E learning under development. Face to face training currently being rolled out across Directorates.	

Ref	6	Risk	<b>Potential Risk that:</b> Workers are subject to violence and aggression at work which may result in injury, lost working days, anxiety and subsequent insurance claim and the Council's arrangements for managing these risks are found to be inadequate.
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Risk Owner	Peter Davies	Strategic objective	Improving the Council's arrangements for managing the risk of violence and aggression to workers will contribute to ensuring Monmouthshire is a <b>safe place to live</b>	Risk category and appetite level	<b>Risk Categories</b> <ul style="list-style-type: none"> <li>• Legal and regulatory</li> <li>• People</li> <li>• Reputational</li> <li>• Governance</li> </ul> <b>Appetite level</b> <ul style="list-style-type: none"> <li>• Health &amp; Safety (1)</li> <li>• Reputational (2)</li> <li>• People (1)</li> <li>• Legal &amp; Regulatory (1)</li> </ul>	Terminate/treat/transfer/tolerate	Treat
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Reason why Identified									
The Council has a legal duty to ensure the health, safety and welfare at work of its employees. The Management of Health and Safety at Work Regulations 1999 requires employers to assess the risks to employees and make arrangements for their health and safety by effective: planning, organisation, control, monitoring and review. The risks covered should include the need to protect employees from exposure to reasonably foreseeable violence. There is evidence of an increase in violence and aggression to workers and it is important that the Council has robust arrangements in place for managing the risks and recording incidents. Trade Unions have requested consideration of a <i>Potentially Violent Persons Register</i> to be available to the Council's front- line workers.									

Risk Level (Pre-mitigation)					Risk Level (Post-mitigation)					Target Risk Level
Year	Likelihood	Impact	Risk Level	Risk Score	Year	Likelihood	Impact	Risk Level	Risk Score	
2024/25	3	4	High	12	2024/25	2	4	Medium	8	

2025/26	2	4	Medium	8	2025/26	*	*	Medium	*	
2026/27	*	*		*	2026/27	*	*		*	

\*Further reducing the risk in 2026/27 will be dependent on the development and maintenance of a Potentially Violent Persons Register for the Authority which can be accessed by front line officers.

Mitigating Actions										
Mitigating Action		Responsibility Holder & Timescale	Mitigation action progress							
i) Review and revise as appropriate the Council's Violence at Work Policy	KT	March 2025	New policy drafted and currently subject to consultation							
ii) Following consultation and sign off, communicate the revised Violence at Work policy to staff	KT	December 2025 onwards	See above. New policy to be considered by JAG December 2025							
iii) Roll out training in managing violence and aggression at work to managers and staff	KT	March 2025	Good progress being made with training delivered across Social Care, Monlife, Housing. Training ongoing.							
iv) Develop proposals for a <i>Employee Protection Register</i> which can be accessed by front line workers for consideration by Corporate Health and Safety Group	KT	March 2026	Initial proposals discussed by Corporate Health and Safety group. Work ongoing.							

Ref	7	Risk	<b>Potential risk that:</b> <p>Work-related sickness absence will increase. Nationally, the rate of self-reported, work-related ill health was higher in 2022/23 than the 2018/20 pre-COVID level, driven by a higher rate of self- reported work-related stress, depression or anxiety which had shown signs of increasing in the recent years prior to the coronavirus pandemic having been broadly flat since 1998/99. Across the Authority, psychological ill health absence (includes stress, depression, anxiety, low mood) accounted for 9,014.74 lost working days in 2023/24 of which 4,040.15 were work related. This is an increase on 8,450 reported in 2022/23. Psychological illness represented 26.7% of the Authority's sickness absence (12% was work related), and there has been an overall upward trend over the last seven years.</p>					
Risk Owner	Peter Davies	Strategic objective	Improving the Council's arrangements for reporting and managing work-related sickness absence will contribute to ensuring Monmouthshire is a safe place to live	Risk category and appetite level	<b>Risk Categories</b> <ul style="list-style-type: none"> <li>Legal and regulatory</li> <li>People</li> <li>Reputational</li> <li>Governance</li> </ul> <b>Appetite level</b> <ul style="list-style-type: none"> <li>Health &amp; Safety (1)</li> <li>Reputational (2)</li> <li>People (1)</li> <li>Legal &amp; Regulatory (1)</li> </ul>	Terminate/treat/transfer/tolerate	Treat	
<b>Reason why Identified</b> <p>Work-related sickness absence is a financial burden on the Authority. Reducing work-related ill- health can help to reduce the burden on healthcare services, as well as the social and economic costs of absenteeism and long-term sickness. Robust systems need to be in place to record and manage work- related ill - health and a key challenge for the Authority is the need to address the underlying causes. This may involve changes to working practices and/or providing more support and training for employees, to help them manage the physical and psychological demands of their work.</p> <p>The national regulator for workplace health and safety, the HSE has identified reducing work-related ill health as its top priority for the next decade. This objective reflects a growing recognition of the significant impact that work-related ill health can have on individuals, families, and society as a whole.</p>								

Risk Level (Pre-mitigation)					Risk Level (Post-mitigation)					Target Risk Level
Year	Likelihood	Impact	Risk Level	Risk Score	Year	Likelihood	Impact	Risk Level	Risk Score	
2024/25	3	4	High	12	2024/25	2	4	Medium	8	
2025/26	2	4	Medium	8	2025/26	*	*	Medium	*	
2026/27	*	*		*	2026/27	*	*		*	
Mitigating Actions										
Mitigating Action		Responsibility Holder & Timescale	Mitigation action progress							RAG
i) Establish a task and finish group to review the adequacy of the systems in place for recording and reporting <b>work-related</b> sickness absence (both psychological and physical ill-health) and implement improvements as necessary.		PG December 2025	Functionality of system is under review to ensure we are able to provide accurate reports on work related sickness absence going forward.							
ii) Using data from i) provide quarterly <b>work-related</b> sickness absence reports to Directorate Health & Safety working groups and the Corporate Health & Safety group to identify any trends and hotspots		PG December 2025	See above							

<p>and inform actions for improvement.</p>		
<p>iii) Implementing actions in Risk 2 relating to the reporting and investigation of accidents and incidents, Risk 3 Training, Risk 4 Assurance, Risk 5 Lone workers, and Risk 6 on Violence at Work should have a positive impact on work -related sickness absence.</p>	<p>March 2026</p>	<p>See above</p>
<p>iv) Promote the Council's Wellbeing and Health offering to employees</p>	<p>LKD March 2026</p>	<p>Information available on The Hub. Further work will be carried out to increase awareness</p>
<p>v) Managers to do more timely referrals to Occupational Health</p>	<p>PG March 2026</p>	<p>This has been identified as a priority for HR. Absence management policy currently under review</p>

Ref	8	Risk	Potential risk that:				
Risk Owner							
	Peter Davies	Strategic objective	Managing health and safety risks associated with Council properties will contribute to ensuring Monmouthshire is a <b>safe place to live</b>	Risk category and appetite level	<b>Risk Categories</b> <ul style="list-style-type: none"> <li>Legal and regulatory</li> <li>People</li> <li>Reputational</li> <li>Governance</li> </ul> <b>Appetite level</b> <ul style="list-style-type: none"> <li>Health &amp; Safety (1)</li> <li>Reputational (2)</li> <li>People (1)</li> <li>Legal &amp; Regulatory (1)</li> </ul>	Terminate/treat/transfer/tolerate	Treat
Reason why Identified							
<p>The Health &amp; Safety at Work Act 1974 places a general duty on employers to "ensure so far as is reasonably practicable the health, safety and welfare at work of all their employees" and section 3 of the Act, General Duty to Others requires employers to conduct their undertaking in a way that does not pose risk to the health and safety of non-employees</p> <p>Councils have a duty to ensure that properties under their control comply with appropriate statutory standards. This task is becoming increasingly difficult in the context of various potentially competing drivers including:-</p> <ul style="list-style-type: none"> <li>The increasing burden of legislative duties on building occupiers and the need to demonstrate competency in identifying and controlling risks</li> <li>Delegation of relevant budgets and responsibilities to individual establishments, notably schools but with ultimate accountability still resting with the corporate body of the Council</li> <li>The consequences of increased delegation which has put pressure on resources retained centrally to develop and monitor compliance with relevant standards</li> <li>Governance arrangements in establishments are becoming increasingly more complex through the move to Shared Services and Partnering arrangements that do not fit easily with traditional landlord and tenant definitions</li> </ul>							

The Council is faced with the situation where day to day responsibility and resources are often delegated to premises/service level but with the ultimate accountability remaining at corporate level within the Council. Compliance officers in property services undertake compliance visits to properties and consider some health and safety risks identified. However, the outcome of these visits is not reported in such a way that trends can be identified or conclusions made around levels of compliance, and performance in rectifying non compliances is not reported. Even if all relevant policies and procedures were in place the Council is faced with the situation of simply not knowing the level of compliance across the portfolio for which it has responsibility. The discovery of non-compliance may only be as a result of an incident on a particular site. In addition to the direct consequences of any incident, the Council could be faced with damage to its reputation, financial loss, individual officers could be faced with legal proceedings and in the worst case, lives of building users could be lost.

Risk Level (Pre-mitigation)					Risk Level (Post-mitigation)					Target Risk Level
Year	Likelihood	Impact	Risk Level	Risk Score	Year	Likelihood	Impact	Risk Level	Risk Score	Risk Level 4
2024/25	3	4	High	12	2024/25	2	4	Medium	8	
2025/26	2	4	Medium	8	2025/26	1	4	Low	4	
2026/27	1	4	Low	4	2026/27	1	4	Low	4	
Mitigating Actions										
Mitigating Action		Responsibility Holder & Timescale	Mitigation action progress							RAG
i) Develop and deliver training for staff responsible for properties 'responsible persons' on property related health and safety matters		KT March 2026	On track. Generic <i>Headteachers as Property Managers</i> training completed. Programme of asbestos training completed including <i>Asbestos Awareness, Duty to Manage Asbestos. Health and Safety Handbook for Property Managers</i> developed to be launched October 2025.							Yellow
ii) Internal audit review of compliance function in Property Services scheduled 2025/26		JF September 2025	Audit completed and draft report issued. Awaiting management feedback.							

iv) Implement recommendations arising from ii) above	NK March 2026	Awaiting finalisation of audit report	
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## RIDDOR REPORTS 2024 /2025

RIDDOR REFERENCE	RIDDOR DATE	INCIDENT DATE	DIRECTORATE	TYPE OF INCIDENT	BRIEF DESCRIPTION OF INCIDENT	REMEDIAL ACTION
B9BDAA8D17	29/04/2024	20/04/2024	Social Care, Safeguarding & Health	More than 7 day absence.	Injured party accidentally dropped pyrex bowl, instinctively caught it but it had struck worktop and smashed. Deep lacerations to 3 fingers	None
9D16D9BF4D	30/04/2024	12/04/2024	Communities & Place	More than 7 day injury,	Slip, trip, fall on same level to waste collection operative due to pot hole in road. Twisted ankle	Pot hole reported to Highways department for repair. PPE in place - non - slip boots. Supervisors advised waste staff not to rush & take extra care.
A6C410A127	30/04/2024	19/04/2024	Communities & Place	More than 7 day injury,	Lifting handling sustained back injury loading waste bags onto vehicle	All grounds staff trained in manual handling. "Toolbox" given via supervisors not to lift / push / pull items which are too heavy and seek assistance.
F516992123	30/04/2024	16/04/2024	Communities & Place	More than 7-day injury,	Slip, trip, fall on same level. Employee tripped over stone on yard floor performing banksman duties Sustained sprained ankle	Depot yard area swept to remove any large debris. PPE in place - non - slip boots in place. Supervisor

						advised all depot staff not to rush & take extra care.
E7D393FF12	20/06/2024	09/06/2024	Communities & Place	More than 7 day injury,	Worker sustained laceration to shin while manoeuvring over some vehicle safety fence	Highways team advised to take extra care and not rush.
16C123FD15	04/07/2024	01/07/2024	Monlife	Child taken directly to hospital for treatment	Finger entrapment in fire door causing laceration. No damage to bones or tendons confirmed. Wound dressed.	Visiting school staff to be briefed on need to maintain supervision and engage pupils with some of the resources available on site and planned activities rather than provide them with free time in the evenings.  Exploring provision of fire door retainers and finger guards.
15E8911417	08/07/2024	04/07/2024	People & Governance	Fracture to foot	Employee tripped when foot went into hole in grass while taking down sign outside polling station	Church warden notified of incident so they can take remedial action to prevent a recurrence i.e. fill holes.
C114711A17	11/07/2024	02/07/2024	Communities and Place	More than 7 day injury.	Employee hit by vehicle driven by member of the public during waste collection	Full PPE worn by all operational staff which includes High visibility jackets & trousers, bump caps and gloves. No fault of staff. Member of public who was driving to blame.
C3DDB41231	19/08/2024	06/08/2024	Communities and Place	More than 7 day injury.	Employee fell through rusty manhole cover while strimming	Risk assessment for task updated to include: All areas to be walked & visually

					grass sustaining strained ligament to knee	checked for potential hazards, areas prior to cutting & strimming.  Manhole wasn't checked for safety by NHS property services. No fault of MCC staff member.
105B111CE7	29/08/2024	22/08/2025	Social Care, Safeguarding & Health	Fractured wrist	Employee slipped on stairs	Manager reinforced need for flat, enclosed, sensible footwear by staff also to use handrail provided and .  walk slowly and steadily, do not rush.
11A1558614	14/10/2024	12/10/2023	Monlife	Member of Public taken directly to hospital for treatment	Asphyxiation leisure centre pool	Internal investigation by Corporate H&S Manager. Report with recommendations to prevent recurrence issued to management.  Recommendations accepted and being implemented.
17211F9586	25/10/2024	17/10/2024	Social Care, Safeguarding & Health	Care home resident taken directly to hospital for treatment	Laceration to head sustained during fall	Internal investigation by manager identified shortfall in standard of care by agency worker during night shift. Agency notified of incident and standards expected reinforced. Duty to Report submitted to safeguarding.

F817DD4D08	29/01/2025	22/01/2025	Communities and Place	More than 7 day injury	Fall from height down some stairs, sprain right hamstring and right gluteal	Staff member advised to concentrate on the task when walking downstairs
11D12E15B1	05/02/2025	04/02/2025	Children and Young People	Teaching assistant fracture to arm	Tripped over computer cable	Computer cable unplugged by and staff in SRB reminded of important of cable safety. Wider communication to staff also issued by Headteacher.
12B136DA12	26/02/2025	16/02/2025	Communities and Place	More than 7 day injury	Employee tripped off edge of pavement spraining ankle and wrist	Staff member advised to take extra care and not to rush.
C212F13E12	25/03/2025	17/03/2025	Children and Young People	More than 7 day injury	School caretaker went to hospital, torn ligament sustained lifting black bag into refuse bin	Headteacher reminded staff not to overload black bags. Training need identified for caretaker. Caretaker manual handling training to be delivered 2025