

**Audit, Finance & Risk Committee**  
**6 June 2019**

**Report for Agenda Item | Rīpoata mot e Rāraki take 4**

**Department: Corporate Services**

**Title | Taitara QLDC Organisational Health Safety and Wellbeing Performance**

**PURPOSE OF THE REPORT | TE TAKE MŌ TE PŪRONGO**

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- 1 The purpose of this report is to provide the Audit, Finance & Risk Committee with a regular update on the Health & Safety performance of the organisation.

**RECOMMENDATION | NGĀ TŪTOHUNGA**

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- 2 That the Audit, Finance & Risk Committee:

1. **Note** the contents of this report.

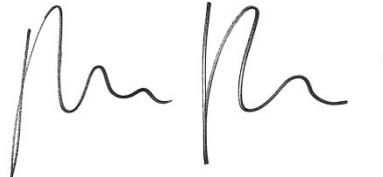
Prepared by:



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Health and Safety Manager

23/05/2019

Reviewed and Authorised by:



Meaghan Miller  
General Manager, Corporate  
Services

23/05/2019

## CONTEXT | HORPOAKI

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- 3 Queenstown Lakes District Council (QLDC) has duties under the Health and Safety at Work Act and subsequent regulations to ensure the safety of employees, and all other persons, at, or in, the vicinity of work or subsequently affected by the work. This duty is upheld through QLDC's safety management system, which is guided by best practice and designed to address operational risks and workforce behaviour.

## ANALYSIS AND ADVICE | TATĀRITANGA ME NGĀ TOHUTOHU

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### 4 Health & Safety Committee Chair: Quarterly Summary

The implementation of the MySafety reporting system has been embedded further into the organisation over this current reporting period. A vast improvement in the efficiency and effectiveness of reporting has been observed. The Health and Safety Manager has been and will continue to work closely with the higher volume user groups in the organisation (e.g. Sport and Recreation and Horticulture teams) to ensure that behaviours around incident and hazard responses are appropriate, and also to improve the flow of information.

This reporting period has also seen four lost time injuries occur, one in February, two in March and one in April, all minor in nature. The Executive Leadership Team and Health & Safety Committee have a high degree of visibility and commitment to reduce lost time injuries, despite the fact they are minor in nature. More recently, this included training for managers with ACC on workplace injury management (undertaken in April). It is notable that there were no new unsafe Total Recordable Injury Frequency Rate (TRIFR) events in December.

We welcomed our new Health & Safety Manager, Alan Thomas in January 2019. This has seen immediate improvements to QLDC Health and Safety thanks to his strong leadership and the vast experience he brings to the role. It is noted that Health and Safety Representatives are well supported by Alan to undertake their roles more effectively. It is noted that Alan has overseen the close-out of over one hundred open incidents on the incident register and at the end of this reporting period, there is only one open incident, which is being progressed with oversight by Alan. He has also overseen the review of several key Health and Safety related policies and procedures which have been already adopted including the consistent and benchmarked safety definitions. This will ensure that the risk associated with these areas are more effectively managed.

In late April, it was announced that after 18 months in the role, the Health and Safety Chairperson Quinn McIntyre would be stepping down from the role in May. A replacement will be found in May with expressions of interest called for.

### 5 Health & Safety Manager:

The commencement of the new Health & Safety Manager in January 2019 has provided an opportunity for a review of QLDC's safety systems. This does not supersede the audit conducted in late 2018, but instead takes a view of continuous improvement around health, safety and wellbeing risk management. As part of that review, the following opportunities to improve our practices were identified:

### a. Consistent and Benchmarked Safety Definitions

In order to measure and benchmark safety performance, it is both helpful and necessary to be consistent with accepted industry standards. In January/February a review of QLDC's safety performance, reporting and definitions was conducted. It was identified that the organisation would benefit from the introduction of clear definitions relating to key safety performance terms, such as First Aid (FA), Medical Treatments Incidents (MTI), Lost Time Injuries (LTI), Restricted Work Injuries (RWI) etc.

Apart from Notifiable Events as defined in section 25 Health & Safety at Work Act 2015 (HSWA), New Zealand has no legislated definitions for incident reporting. This has led to most Person Conducting a Business or Undertaking (PCBU's) defining their own set of criteria for key safety definitions.

With a priority on benchmarking, and the ability to measure safety performance against leading organisations in New Zealand, we looked to the most commonly used performance measures and definitions. It is well known that a number of larger Person Conducting a Business or Undertaking (PCBU's) in New Zealand, including those involved in the Business Leaders Health & Safety Forum are already using and recommending the adoption of the American OSHA standard. (Part 1904 - Recording and Reporting Occupational Injuries and Illness).

This allows them to benchmark within New Zealand, and against similar organisations offshore. OSHA strictly defines what an FA occurrence is and, in essence, anything that does not fall under the classification is MTI

Therefore, in order to effectively benchmark our safety performance, QLDC undertook to adopt the OSHA 1904 definitions, which are listed at Appendix A to this document.

### b. Injuries Requiring Offsite Treatment Procedure

As discussed with the committee previously, a number of events contributing to both the Total Recordable Injury Frequency Rate (TRIFR) and Lost Time Injury Frequency Rate (LTIFR) appear to be low risk, manual handling-related events, which hold potential to be managed more effectively so as not to result in lost time.

As a result, an opportunity to improve our procedures for staff that may require treatment that is beyond first aid available at QLDC sites has been identified. This includes active management of the return to work process, and clear dialogue with treatment providers to ensure they are aware of alternate duties, tasks and working conditions available for injured employees. This opportunity is to reinforce and clarify the existing process, and strengthen the organisation's overall response to such events.

In direct response to this, a process has now been established which sets out clear requirements for supporting employees injured at work who require treatment offsite i.e. a first aid response is insufficient or inappropriate. This document

outlines the types of injuries, or suspected injuries, where QLDC staff requiring off site treatment must be accompanied or taken to the treatment provider on the day the incident occurred. This is for reasons of support, to reduce the risk of further injury, and ensure they arrive safely. The procedure is at Appendix B of this document.

### c. Preferred Medical Supplier

Part of these improvements will involve the engagement of a Preferred Medical Supplier. While officers intend to establish such a provider, the procurement process is yet to be completed.

Some of the benefits of this include:

- A relationship with agreed service provisions from the treatment provider, to ensure staff receive timely, quality and consistent care and follow up.
- Understanding by the provider of our requirements for our workers in seeking offsite treatment. For example transport to and from the provider, completion of assessments for fitness for work. Suitable alternate duties that QLDC can offer etc. Quality follow up and, where required, advice and workplace support for stay at work and back to work planning.

The first of these improvements has already had a positive effect on our Total Recordable Injury Frequency Rate (TRIFR).

Although January showed a drop in Lost Time Injuries (LTI) they have risen since. The expectation is that the adjustments made above will directly, and positively impact the LTIFR as we go forward.

### d. Accident Compensation Corporation (ACC) Managing Return to Work training

A Return to Work training session was held for all people managers, specifying both QLDC and ACC requirements for effectively managing return to work plans for injured employees, regardless of whether they have been injured at work or otherwise. This training was delivered by ACC in conjunction with QLDC.

### e. Volunteers

In March, QLDC and Volunteering New Zealand ran a workshop that included QLDC and DOC staff, and volunteers. The workshop was well received and we will be running this again to benefit our other staff and volunteers who were unable to attend the first workshop.

An Induction Pack for Volunteers is in final review and will be issued in the next quarter. This document aids QLDC and volunteers to step through each of our responsibilities under the legislation and to provide the correct level of safety framework for the volunteer agreement.

This is recognised 'good practice' within New Zealand.

## 6 Reporting period

As health, safety and wellbeing information is captured at the end of each calendar month, the statistics captured in this report cover the period 1 January 2019 through 30 April 2019.

## 7 Key Risks

Key organisational health and safety risk themes that require continuous or improved management, are outlined below:

### a. Contractor Activities

Refers to contract workers and work, engaged by or on behalf of QLDC

### b. Fleet Operations

Refers to all QLDC work related vehicle and mobile plant use

### c. Public Interaction

Refers to all direct engagement with the general public for work purposes

### d. Fitness for Work

Refers to workers physical & mental capacity to perform work safely

### e. Isolated Workers

Refers to workers operating alone or from remote locations

### f. Volunteer Activities

Refers to volunteer workers and work, engaged by or on behalf of QLDC

## 8 Lead Indicators

Steps Council employees have taken to prevent harm.

- a. Improvement Reports: Any pro-active reporting which generate a safety improvement action.

Hazards	Audits
21	77

- b. Training-Education: Any sessions conducted with employees that provide skills and knowledge to perform work safely.

Inductions	Other
25	366

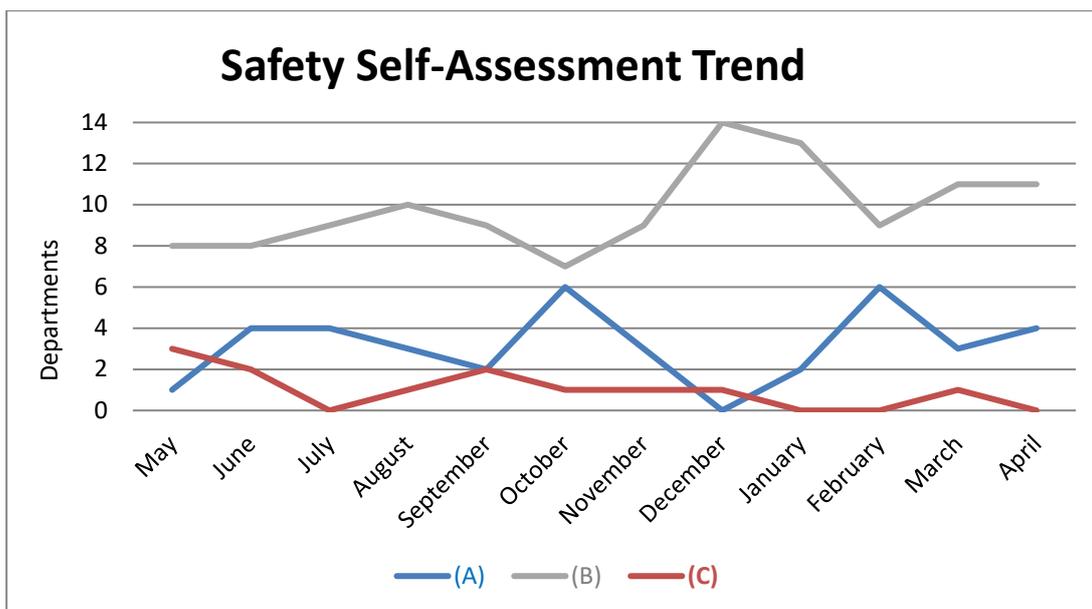
- c. Risk Analysis. Any assessments that identify the risks and control measures associated with a work process or situation.

Take 5
656

- d. Department Safety Performances: Council departments are required to rate their monthly safety performance based on a simple question; Have they improved safety (A score) or has it been business as usual (B score)? A department is usually expected to rate themselves a C in response to a significant accident or incident or where they consider their performance is in need of improvement.

A	B	C
15	44	1

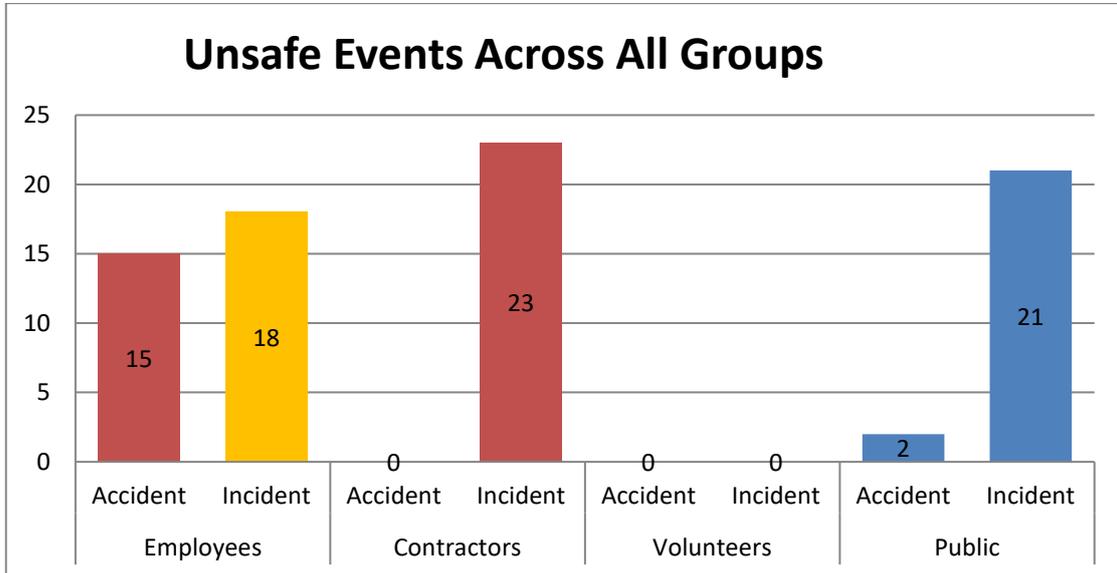
- e. Reflects self reported department safety performances over the previous 12 months.



- 9 **Lag indicators; Unsafe Events:** Reflects unplanned work situations or occurrences that have (or could have) resulted in harm to the workforce or public.

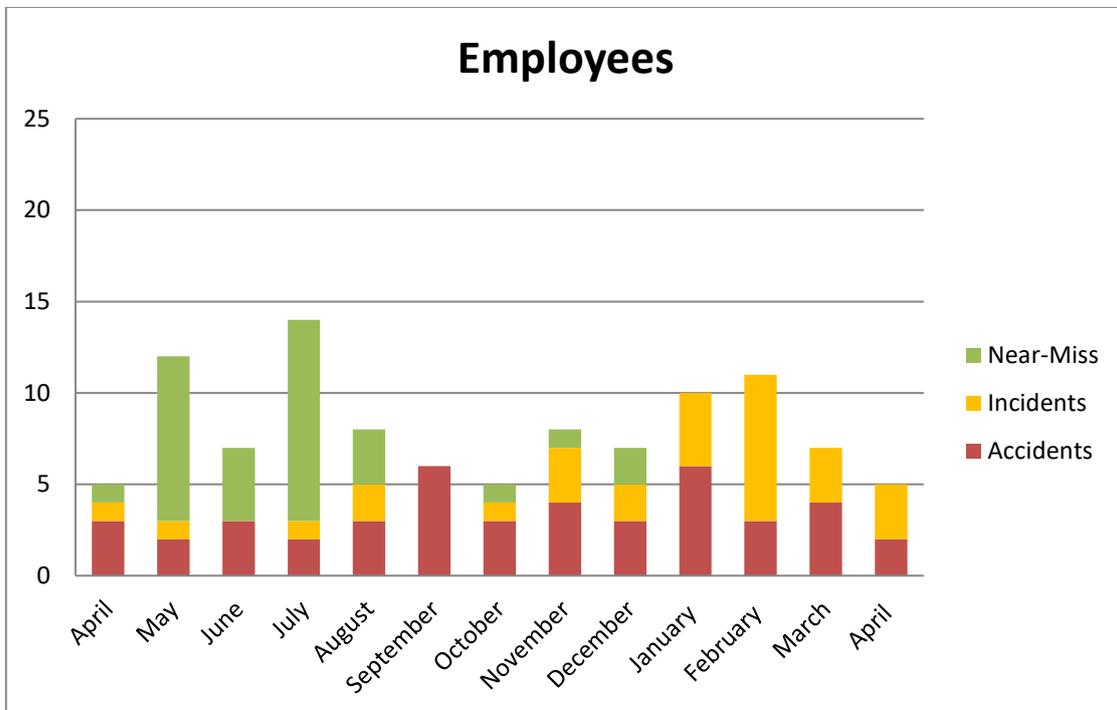
a. All Council related Accidents, Incidents and Near Miss events:

**Note: Under the new safety definitions (from January 2019), Incidents now include Near Misses.**



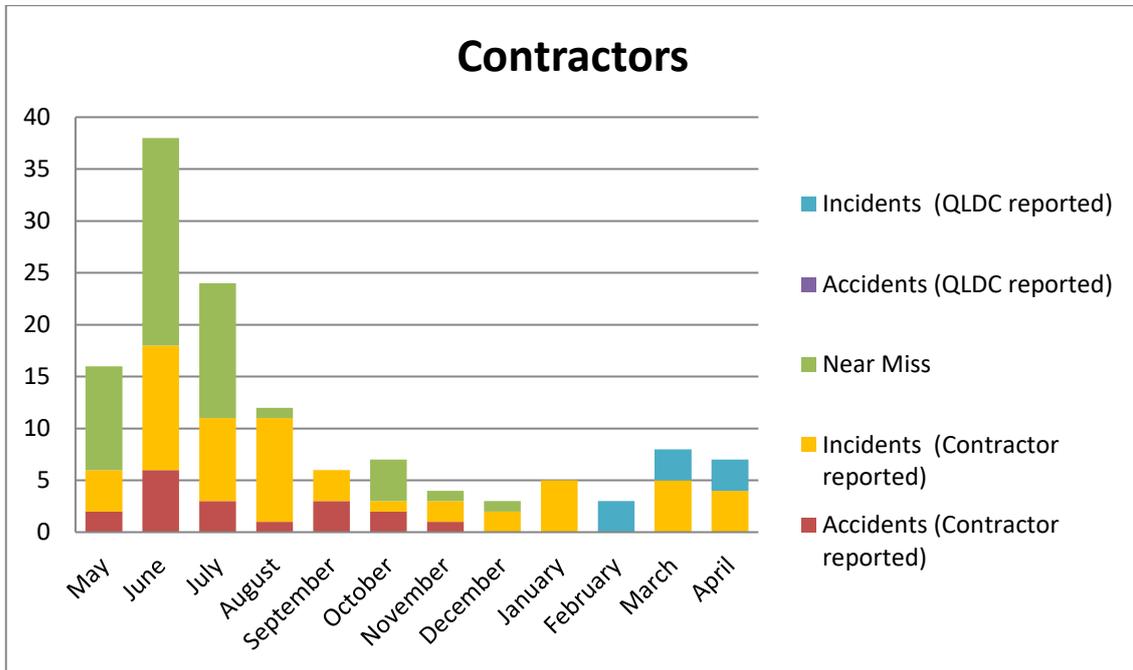
b. Employee Accidents, Incidents and Near Miss event trend:

**Note: Under the new safety definitions (from January 2019), Incidents now include Near Misses.**



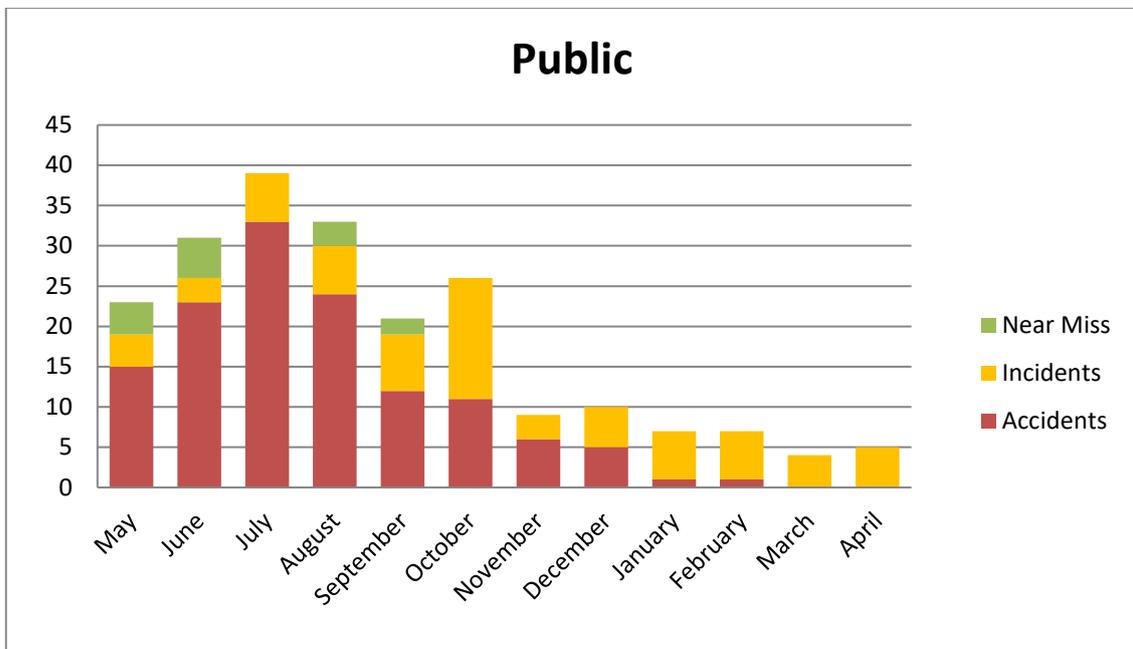
c. Contractor Accidents, Incidents and Near Miss event trend

**Note: Under the new safety definitions (from January 2019), Incidents now include Near Misses.**



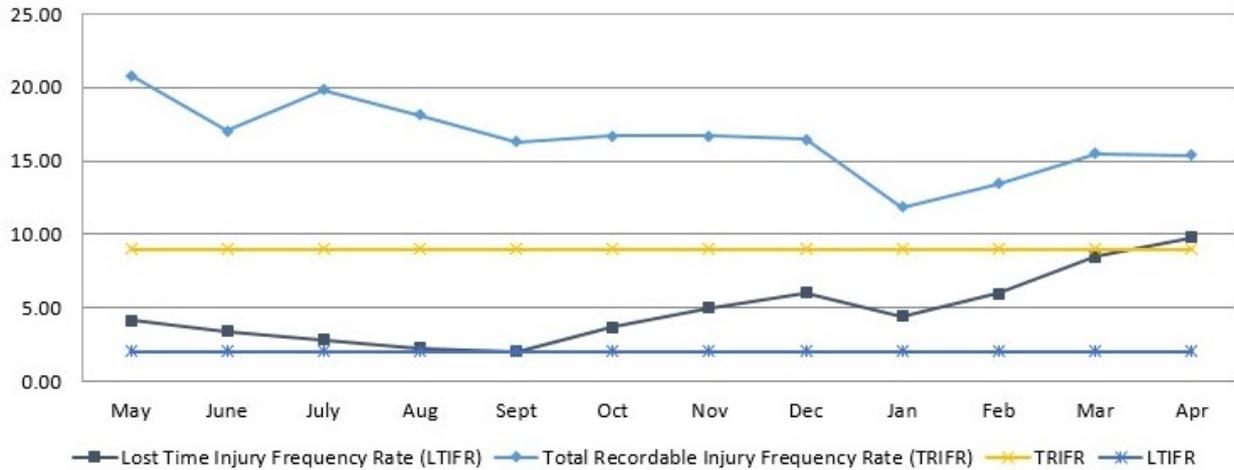
d. Public Accidents, Incidents and Near Miss event trend

**Note: Under the new safety definitions (from January 2019), Incidents now include Near Misses.**



e. Identifies the rate of recordable employee injuries over the last 12 months

**Frequency Rates  
(1,000,000 hrs worked)**



10 **Key Unsafe Events:** Details about significant Accidents, Incidents and Near-Misses (January – April 2019).

Event	Action taken
<p><b><u>Lost Time Injury</u></b></p> <p>Worker was demonstrating the streamline swimming position (hands above the head) to students and hyper-extended their back</p>	<ul style="list-style-type: none"> <li>Incident investigated. Body stressing root cause no other factors involved.</li> <li>Returned to work on normal duties after one day away.</li> </ul>
<p><b><u>Lost Time Injury</u></b></p> <p>Worker passing swimming pool office slipped when they turned to talk to a colleague causing them to fall.</p>	<ul style="list-style-type: none"> <li>Incident investigated. Worker was rushing and slipped on surface.</li> <li>Reiterated to personnel to take their time when at pool side.</li> <li>Returned to work on normal duties after one day away</li> </ul>
<p><b><u>Lost Time Injury</u></b></p> <p>Worker bent to retrieve book that was obscured. Their colleague attempted to point out the location of book which set off the sliding door striking worker on head.</p>	<ul style="list-style-type: none"> <li>Suspected concussion. Worker taken to treatment provider.</li> <li>Door opening has been slowed down.</li> <li>Any future work requiring access to the opening side of door requires it to be isolated.</li> <li>Returned to work on normal duties after one day away.</li> </ul>

<p><b><u>Lost Time Injury</u></b></p> <p>Worker was kicked in head by child whilst teaching them to swim</p>	<ul style="list-style-type: none"> <li>• Suspected concussion.</li> <li>• Returned to work on normal duties after one day away</li> </ul>
<p><b><u>Serious Occurrence (Non Injury)</u></b></p> <p>Contractor seen without height safety equipment in use on top of Queenstown Memorial Roof cleaning gutters whilst leaning over edge</p>	<ul style="list-style-type: none"> <li>• Contractor stopped from work and required to deploy the correct height safety equipment.</li> </ul>
<p><b><u>Serious Occurrence (Minor Injury)</u></b></p> <p>Worker started vehicle in depot without getting into driver seat properly. Vehicle moved off dragging them with it.</p>	<ul style="list-style-type: none"> <li>• Minor injury of bruising.</li> <li>• Toolbox talk undertaken by the worker on the incident and why personnel should get completely into the driver seat before starting vehicles</li> </ul>

#### 11 WorkSafe Notification: Unsafe events/tasks that required notification to regulator.

		
Notifiable Event Type	#	Description
Uncontrolled release of a substance	1	Hazardous substance reported to have spilled onto worker. On investigation it was found that the substance was not a risk to person's health. However it had not been labelled properly and was not stored correctly. Substance storage reassessed and new cabinet put into place. All substances checked for correct labelling and proper storage. WorkSafe informed of this and closed out the file immediately.
Work	0	N/A

**12 Communications:** Critical safety warnings or information that is broadcast across the organisation.

 <b>Safety Alerts</b>	
Measles notification 12.03.2019	<ul style="list-style-type: none"> <li>• Email to all staff to provide information on the illness, symptoms and treatment for measles.</li> <li>• Worked with Southern District Health Board to provide information and links back to their web site if our staff had more questions. No reported symptoms from any QLDC staff thus far.</li> </ul>

 <b>Procedure Alerts</b>	
Injury Requiring Offsite Treatment	Policy confirmed, and issued to staff outlining the procedure where QLDC staff requiring off site treatment must be accompanied or taken to the treatment provider on the day the incident occurred.

**13 Training:** Courses that have been prepared to ensure employees perform work safely.

Month	Type
January	Child Protection Policy Training
February	Child Protection Policy Training
March	Management of Volunteers workshop Child Protection Training
April	Tactical communications Front Counter Safety ACC Workshop – Return to Work Plans H&S Champions and Contractor Management - QEC

- 14 **Wellbeing:** Steps the organisation is taking to ensure the physical and mental health of the workforce.

Month	Initiative
January	Healthy Eating
February	Bikewise
April	Flu Vaccinations

**Advice:** The outcome of this report is to ensure the Audit, Finance & Risk Committee are updated as to the Health & Safety performance of the organisation for period January 2019 – April 2019.

### CONSULTATION PROCESS | HĀTEPE MATAPAKI:

#### > SIGNIFICANCE AND ENGAGEMENT | TE WHAKAMAHI I KĀ WHAKAARO HIRAKA

- 15 This matter is of low significance, as determined by reference to the Council's Significance and Engagement Policy because it is purely operational in matter and does not directly affect Council's level of service to the community.
- 16 This matter is of low significance and therefore does not require community consultation.
- 17 The persons who are affected by or interested in this matter are: Employees, contractors, volunteers and public persons engaged with council for the purposes of work or directly influenced by the councils work process
- 18 The Council has not consulted directly on this matter in the past.

#### > MĀORI CONSULTATION | IWI RŪNANGA

- 19 Community consultation is not required for this matter.

### RISK AND MITIGATIONS | NGĀ RARU TŪPONO ME NGĀ WHAKAMAURUTANGA

- 20 This matter relates to the management and governance framework for all Health and Safety risks that are documented within the My Safety Register.
- 21 This Health and Safety framework helps to support the development of a more engaged and capable Health & Safety culture across the Council; leading to more effective hazard identification and mitigation outcomes.

### FINANCIAL IMPLICATIONS | NGĀ RITENGA Ā-PŪTEA

- 22 None

**LEGAL CONSIDERATIONS AND STATUTORY RESPONSIBILITIES | KA TURE WHAIWHAKAARO,  
ME KĀ TAKOHAKA WAETURE**

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- 23 Queenstown Lakes District Council has legal duties owed under the Health and Safety at Work Act, and associated regulations, which must be considered in all Council health, safety and wellbeing matters.

**ATTACHMENTS | NGĀ TĀPIRIHANGA**

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A	Definitions for Statistics Reporting
B	Injury Requiring Offsite Treatment