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Introduction


The recommendations made in the 2015 Health and Safety Annual Report were endorsed by LG at its meeting in September 2015 and an implementation plan was produced. The majority of recommendations have now been implemented; however the following items are still receiving attention:

- The introduction of a H&S reference guide for staff.
- Design and implementation of an update cycle for refreshing general H&S awareness training for all staff members.
- Design and implementation of a 3 year display screen equipment (DSE) training cycle.

Progress and estimated completion dates for these items are covered in the report. This annual report has been produced with reference to OHSAS 18001:2007 and BS OHSAS 18002:2008 which are, respectively, a recognised standard for occupational health and safety management systems, and guidelines for their implementation.

The following sections set out the key aspects for review with recommendations for remedial action and improvement.
Section 1. H&S Policy

1.1 The core document of the HSMS is the general statement of health and safety policy. A comprehensive review of the policy was carried out in August 2014 following discussion by the H&S Steering Group.

1.2 Following a routine review, it is considered that the policy aims and commitments are still appropriate to the needs of the organisation, however a minor adjustment is proposed to reflect the role of the recently established Strategic Resources Board.

1.3 Recommendations: None

Section 2. Hazard Identification, Risk Assessment and Control

2.1 Our system for identifying hazards, assessing risks and implementing control measures consists of: a risk register, a risk assessment procedure and written management responsibilities for implementing risk control measures.

2.2 The risk register lists the significant hazards relevant to our work, and takes account of internal and external information including inspection reports, accident reports, legal and technical references. Hazards are given a priority (low, medium or high) rating based on the severity of potential harm and likelihood of occurrence. The priority rating determines audit frequency. There is currently no agreed process or frequency for review of the risk register.

2.3 The risk assessment procedure describes how we carry out risk assessments for work activities and record the significant findings, existing control measures and risk control action plan. The responsibility for implementing control measures, the risk control action plan and any related work procedures rests with line managers across the organisation.

2.4 In addition to the general requirement to assess risk, Regulations require specific risk assessments for manual handling operations, hazardous substances and use of display screen equipment (DSE). For us, the most significant of these is DSE, due to the number of staff involved and the potential for impact on health and wellbeing. Our current DSE procedure requires significant input by staff and managers on an ongoing basis.

2.5 Late in 2015, some analysis was carried out on DSE assessments and DSE training, to determine:
   - The number of DSE users (473)
   - The proportion of users who completed a self-assessment form (81%) and training (61%)
   - The proportion of users completing a form who reported they were suffering from pain or other symptoms they think may be caused or made worse by DSE use (30%).
Individual assessments were checked to ensure measures were in place to address any pain or symptoms. Office heads / team leaders were contacted where anomalies were found regarding training, assessments or the proportion of users reporting pain or other symptoms. The exercise will be repeated this year to determine whether interventions have improved matters, however at the time of writing the return of assessments has not been sufficient to begin the exercise.

2.6 Given the increased use of DSE, (especially portable DSE), the potential impact on wellbeing, and the significant time involved in implementing the assessment process and analysis of data, it would make sense to research the options available to make the compliance process as efficient and effective as possible.

2.4 Recommendations:

- Set appropriate intervals for reviewing the risk register, with input from relevant staff members and representatives.
- Continue to monitor performance indicators relating to DSE, reporting findings to the Appointed ACE.
- Review and evaluate commercially available systems for managing DSE risk for suitability and make recommendations to LG as appropriate.

Section 3. Resources

3.1 In line with our H&S Policy, significant staff, management and financial resources have been made available for the development, maintenance and implementation of the HSMS, for example:

- Funding is available for equipment, furniture, training, specialist consultancy and occupational health support;
- An Assistant Chief Executive is appointed to take the lead on H&S management;
- Senior managers meet regularly to maintain strategic oversight of the HSMS;
- A large number of staff throughout all offices have volunteered or been nominated to support the implementation of the HSMS, through the roles of nominated person, DSE assessor, first aider and H&S committee representative.

However, there are some issues which will be addressed, in particular:

- offices with limited or no DSE assessor, nominated person cover or health and safety committee representation;
- smaller teams where coverage arrangements have not been agreed;
- limited administrative support available to the H&S adviser within FM, which results in backlogs when dealing with urgent reactive work or working intensively on high profile projects, such as major events.
3.4 Recommendations:

- Group Heads and Office Heads should review and agree cover arrangements and consider providing additional cover which can be redeployed within the Group when necessary;
- The requirement for H&S trained administrative support within FM should be reviewed.

Section 4. The H&S Inspection Process

4.1 SPCB operates two separate programmes of inspections to monitor safety standards in its buildings:

- 6 monthly office inspections, carried out by office based nominated persons
- Annual common area inspections, carried out by the H&S Adviser, with assistance from the FM Contractor Co-ordinator

  The Chief Executive has emphasised to Group Heads the importance of these inspections being completed on time.

4.2 Most office and common area inspections are completed to schedule, with any late reports submitted very soon after the due date. Action points noted in the reports are generally minor and are dealt with either within the office or as reactive jobs by FM service contracts.

4.3 In January 2016, a new section was added to the inspection report pro forma to allow Nominated Persons to escalate recurring matters or issues which require immediate attention. So far the action points recorded in the new section have been minor items which were noted in previous inspections but not fully resolved.

4.4 Common area inspections are completed using an online form, which generates a percentage score for each inspection. The action points raised during the reporting year were minor in nature and there are no apparent trends.

4.5 Recommendations: none.

Section 5. The Accident, Near Miss and Hazard Reporting Procedure

5.1 Accidents, near misses and hazards are defined as follows:

- Accident: an unplanned event resulting in injury or property damage
- Near miss: an unplanned event which had the potential to cause injury or property damage, though none was caused
- Hazard: any undesired circumstance which could cause injury or property damage.
5.2 An electronic accident, near miss and hazard reporting procedure was introduced in February 2015, designed to maximize reporting, replace an outdated paper based procedure, improve data security and provide new ways to export data and identify trends. A stakeholder and communications plan was implemented to raise awareness of the new procedure, and secure longer term engagement by refreshing key messages about the importance and value of incident reporting.

5.3 The procedure has been successful in encouraging Parliament staff to report incidents; however we are still seeking to improve uptake by MSPs, MSP staff and on-site contract staff. Numbers indicate a need for more targeted marketing of the procedure towards these groups.

5.4 Feedback on the reporting procedure has generally been positive with few technical problems reported.

5.5 We are still developing the facilities that the system provides for automatically exporting data and generating statistical reports. The process of completing the investigation form also requires to be streamlined.

5.6 Recommendations: see section 7.

Section 6. Accident, Near Miss and Hazard data

6.1 Key Information

Analysis of recent accident, near miss and hazard data reveals the following information:

- The number of near misses reported in 2015/16 was higher than in any year since 2008/9 and nearly double the average number reported annually during the previous three years (26 reports compared with 14). Over the same period, the number of near misses expressed as a percentage of all reports increased from 21% in the previous three years to 45% in 2015/16.
- The number of accidents reported in 2015/16 (32) was significantly lower than in any previous year and down 40% compared with the average number reported annually during the previous three years.

6.2 The increase in the reporting of near misses is positive, and probably due to the simplified reporting system and improved co-operation of staff. Against this background it seems likely that the drop in reported accidents represents a genuine reduction, and not the result of underreporting.
6.3 In recent years, five reportable injuries have occurred on Scottish Parliament premises:

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<th>Year</th>
<th>Number of Reportable Injuries</th>
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<td>2016/17</td>
<td>(at time of writing): 3</td>
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<tr>
<td>2015/16</td>
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The details of these injuries are as follows:

- 2/7/16: Agency staff member fell from a height, suffering a ‘specified injury’ in terms of RIDDOR 2013);
- 26/4/16: Visiting contractor injured finger when repairing a handrail, requiring surgery (‘over 7 day injury’);
- 8/4/16: Visiting contractor slipped in a construction site within the service yard, suffering a soft tissue leg injury, (‘over 7 day injury’);
- 29/11/15: Staff member slipped in the service yard, suffering a soft tissue leg injury, (‘over 7 day injury’);
- 14/6/15: Staff member struck by service yard gate, (soft tissue ankle injury, ‘over 7 day injury’).

6.4 The occurrence of RIDDOR reportable injuries is always a serious matter as they are usually more severe and involve extended periods of absence. Our reportable injury target should therefore be zero.

6.5 Recommendations: see section 7.

Section 7. Incident investigations and corrective actions

7.1 Accident, near miss and dangerous occurrence investigations are carried out at different levels, depending on the complexity and potential severity of the incident. An initial investigation is carried out by line management and in some cases this is followed by an additional investigation by the H&S adviser. A more in-depth analysis of the circumstances may additionally be carried out. In all cases, corrective actions and recommended completion dates are recorded on an investigation form and responsible persons are notified accordingly.

7.2 The current status of incident investigations for the year 2015/16 is as follows:

- Total number of accidents / near misses reported: 58
- Number of additional investigations started: 8
- Number of additional investigations completed: 8
- Number of corrective actions identified: 32
- Number of corrective actions completed: 22
- Number of root cause analysis investigations started: 0
7.3 A review of accident and near miss investigation records indicates that fewer were subject to an additional investigation than in the previous year, (16% down from 39%).

7.4 A review of hazard investigations reveals little recorded evidence of investigation in most cases. Unless there are circumstances which justify escalation, hazard reports tend to receive a brief informal investigation with action points referred to the appropriate service contracts through the FM helpdesk.

7.5 Recommendations:
- Continue to refresh messages to all stakeholders regarding accident, near miss and hazard reporting.
- Target messages about incident reporting to Members and their staff with reference to the stakeholder and communications plan, and in consultation with FM customer relationship management and the BIT engagement manager.
- Consider and agree with contract managers options (including incentives) for encouraging on site contractors to use the reporting procedure, emphasising that incident reports are a way to learn and improve, not apportion blame.
- Agree an ongoing target of zero for reportable injuries, diseases and dangerous occurrences.
- In consultation with BIT, explore the options available to improve data export and presentation.
- Follow up all outstanding corrective actions to completion.
- Consider ways to streamline the process for recording investigation findings, including a free text box for recording simple investigations.

Section 8. Participation and consultation:

8.1 The Fire, Health and Safety Committee is the focal point for consultation on H&S matters. There were no significant changes to the committee structure or business during the reporting year.

8.2 Recommendations: none.

Section 9. Communication from Interested Parties

9.1 The majority of requests for H&S assistance come to the H&S adviser via the FM Helpdesk. A total of 57 calls were logged to the H&S queue during the reporting year, continuing a sharp downward trend in the number of calls over the last two years. The calls received are predominantly requests for workstation equipment or first aid supplies and notifications of accidents, near misses and hazards.

9.2 Very few heating and ventilation complaints were received by the H&S Adviser during 2015/16, which appears to be due to successful new approaches for managing complaints and controlling heating:
- FM Customer Relationship management have brought together the main players and managed customer concerns in known problem areas;
- The temperature set point for work rooms has been increased, use of portable heaters has been minimised and the heating system has been allowed to automatically adjust in accordance with design.

These approaches have made it possible to identify and address isolated problem areas more effectively.

9.3 Recommendations: none.

Section 10. Legal and Enforcement Action

10.1 No enforcement action or enforcing authority investigations occurred during the reporting year.

10.2 Recommendations: none.

Section 11. Contractors

11.1 Contractor access and safety is managed using the electronic security access and works approval system. Under the procedure, contractor sponsors must submit a security access / works approval form in advance of any planned work. Contractors must provide a suitable and sufficient risk assessment and method statement for certain categories of work, plus other documents as required.

11.2 On site contractors have taken over the role of managing site inductions for contract staff, and this is monitored by the FM contractor coordinator through audit. The FM contractor coordinator carries out further audits to verify that contractors are working in accordance with agreed methods, and leaving work areas clean, tidy and in good condition. It was decided to expand the programme of audits to include on-site contractors managed by Broadcasting, BIT and EET, as well as those managed by FM. Audits have revealed minor issues around security clearance and completion of contractor inductions which have been dealt with informally.

11.3 Recommendations: none

Section 12. Audit

12.1 Seven audits were carried out under the audit plan to verify compliance with legislation, suitability of current procedures, adherence to those procedures and opportunities for improvement. The findings are summarized as follows:

- Work in Confined Spaces: One minor finding and two observations were made, all of which have been addressed.
- High level maintenance: Four potentially significant findings and two minor findings were noted, all of which have been addressed.
• **Workplace Transport**: Three significant findings and two minor findings were noted. Two of the significant findings are still in hand (develop and introduce a service yard policy and procedure / assess training needs and address).

• **X-ray baggage screening (radiation safety)**: an annual audit carried out through our radiation protection advice contract. Two minor findings were noted, which have been addressed.

• **Sources of Energy /Isolation Procedures**: to review contractor procedures for electrical safety and identify opportunities for improving infrastructure and working procedures. Four minor findings were identified, all of which have been addressed.

• **Driving for work**: to review relevant documents and records and driving and vehicle management practices across all offices. One minor finding, five potentially significant findings and one significant finding were identified. Progress on two items requires checked, all other items completed or ongoing.

• **VES, Powered doors and windows**: physical inspection of a sample of powered doors / windows and examination of relevant records. Five minor, three potentially significant and two significant findings were noted. The two significant findings require further action to resolve, and are in hand.

12.2 **Recommendations**: none.

Section 13. Training

13.1 The 2014-15 annual report made three recommendations relating to information for staff and staff training:

   i) **A paper should be produced by the H&S adviser, in consultation with HR, employment agency contract managers and the Fire Safety Adviser, setting out proposals to ensure timely completion of fire and safety e-learning by all new starts**: this recommendation was addressed, and, additionally was made the subject of the last Group Annual H&S Report, however the underlying issue still persists, and will require ongoing attention by management.

   ii) **An update cycle should be implemented for general H&S awareness training for all staff members, utilising SP Learning as appropriate**: A proposal to develop an e-learning course was agreed with the HR Organisational Development team and work began on an e-learning course in late August. A working demo of the course will shortly be handed over for evaluation in November 2016.

   iii) **A 3 year DSE training cycle should be designed using a range of information, instruction and training methods, (such as e-learning, improved guidance, snippet sessions on postural awareness and an enhanced assessment**
process incorporating guidance): the three year cycle was developed and passed to DSE assessors for comment in May. The cycle is summarised as follows:

- **Year 1 (2015-16)** – all DSE users complete DSE e-learning course on SP Learning.
- **Year 2 (2016-17)** – new starts and new DSE users complete the DSE e-learning course, plus any existing staff who have not already done so. Additionally, all users should read the guidance on seated posture, portable DSE, sit/stand working, tips and advice and instructions for DSE users and complete a knowledge check on SP Learning. (The knowledge check is being developed and will be launched in November 2016).
- **Year 3 (2017-18)** – DSE users will be invited to attend a snippet providing up to date guidance on DSE use (focusing on posture, use of portables and sit/stand working), plus any additional training arising from new DSE compliance system.

iv) Introduce a centralised reference, possibly in the form of a web based guide for staff, subject to the approval of the H&S Steering Group and consultation with the H&S Committee, (H&S Adviser): Discussions were held with HR early in 2016, and it was agreed that the new reference guide would be accommodated within the staff handbook. Development of the guide has begun and it is intended to publish it by end December 2016.

13.2 The roll-out of the improved DSE assessor course continued during 2015-16. The majority of assessors have now received the course, however a final course will be held later in the year. Attention will then turn to refreshing DSE assessor training and maintaining skills. It is proposed to run short facilitated training sessions and, separately, product awareness sessions involving equipment and furniture suppliers.

13.3 The process for training nominated persons continues in the established format, and, while there are no immediate plans to change the training it is recognized that the training is relatively time consuming, and choice of dates is limited. Consideration should therefore be given to alternative training methods.

13.4 First aid training continues to be provided through off-site scheduled courses, which is the most flexible and cost effective option. It is proposed to use a new online skills update course instead of a half day off-site course. The standard first aid training course content has recently been updated to include defibrillator training, therefore it will eventually be possible to phase out the separate defibrillator course, and replace it with a more informal practice session.

13.5 A generic half day manual handling training course was delivered to 39 staff whose role involves moving and handling of loads. As there is benefit in including an element of face to face training in the individual’s working environment, it is proposed to continue with this approach, perhaps supplemented with e-learning refresher training.
13.6 There is currently no single reference document which sets out H&S competency requirements for specific job roles. This would be a useful reference point for staff and management, providing more certainty about H&S training requirements.

13.7 **Recommendations:**
- **Office Heads** should continue to monitor uptake of mandatory induction training by new starts, setting an expectation that it should be completed within agreed timescales.
- The **H&S Adviser** should:
  - Review options for the training of nominated persons to maximise attendance.
  - Promote the use of the new online first aid skills update course.
  - Consult with Organisational Development colleagues regarding the introduction of a H&S Competency matrix or equivalent.

**Section 14. H&S Performance**

14.1 A list of KPIs was reviewed by the H&S Steering Group during the course of the reporting year.

14.2 The current list of KPIs is as follows:
- KPI1: The percentage of new starts who complete the online health and safety induction course within 3 weeks of their start date.
- KPI2: The percentage of safety post holders in place and fully trained.
- KPI3: The percentage of contractor inductions completed, (now monitored by the FM Contractor Co-ordinator).
- KPI4: Reported accidents, near misses and hazards.
- KPI5: The number of overdue office inspections, common area inspections and audits.
- KPI6: The number of open and overdue significant H&S actions arising from inspections and audits.
- KPI7: The number of open and overdue occupational health referrals for Musculoskeletal Disorders.
- KPI8: Statistical information from DSE self-assessments.

14.3 **Recommendations:** the list of KPIs should be reviewed by the Appointed ACE and H&S Adviser.
Section 15. Changes in Legislation

15.1 The Control of Electromagnetic Fields Regulations 2016 came into force on 1st July 2016. The Regulations cover situations where electromagnetic fields are generated in the course of work. In brief, the Regulations require employers to identify sources of electromagnetic fields in the workplace, assess field levels and make an action plan to ensure that employees are not exposed to field levels in excess of exposure limit values. In certain situations, a specific risk assessment must be carried out and the risks should be eliminated or reduced to a minimum. The Scottish Parliament operates equipment which generates electromagnetic fields, (security radio systems, Wi-Fi systems and high voltage transformers), however in our situation, it is unlikely any significant action will be required to control risk.

15.2 Recommendations: implement the Control of Electromagnetic Fields Regulations 2016, recording the significant findings in an exposure assessment.

Jake Fenton BSc. CMIOSH, MREHIS Ch.EHO
H&S Adviser
## Appendix 1: Accident and Near Miss Data

### Annual Summary

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### Accident and Near Miss Data

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### Accident Location (Internal / External)

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### Accidents by Month

- April: 3 accidents
- May: 4 accidents
- June: 5 accidents
- July: 1 accident
- August: 4 accidents
- September: 3 accidents
- October: 3 accidents
- November: 4 accidents
- December: 1 accident
- January: 0 accidents
- February: 3 accidents
- March: 1 accident
- Total: 32 accidents

### Near Misses by Month

- April: 3 near misses
- May: 2 near misses
- June: 3 near misses
- July: 3 near misses
- August: 2 near misses
- September: 1 near misses
- October: 1 near misses
- November: 1 near misses
- December: 0 near misses
- January: 2 near misses
- February: 5 near misses
- March: 3 near misses
- Total: 26 near misses

### Hazards by Month

- April: 2 hazards
- May: 1 hazard
- June: 2 hazards
- July: 0 hazards
- August: 0 hazards
- September: 0 hazards
- October: 1 hazard
- November: 3 hazards
- December: 4 hazards
- January: 4 hazards
- February: 6 hazards
- March: 8 hazards
- Total: 38 hazards

### Accidents by Type

- Slip, trip or fall: 14%
- Injured while lifting or carrying: 2%
- Hit something fixed or stationary: 2%
- Burn: 0%
- Road or other traffic incident: 0%
- Workplace transport incident: 2%
- Exposure to substance or agent: 0%
- Hit by a moving or falling object: 14%
- Other: 14%

### Accidents by Location

- Internal: 97%
- External: 3%

### Accident Location (Internal / External)

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### Visitors

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### MSPs & Staff

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### Parliamentary Staff

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<th>May</th>
<th>Jun</th>
<th>Jul</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Year</th>
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</thead>
<tbody>
<tr>
<td>2015/16</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
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</tr>
</tbody>
</table>

### Accidents and Near Misses

- Accidents
- Near Misses

### Accidents by Type

- Slip, trip or fall
- Injured while lifting or carrying
- Hit something fixed or stationary
- Burn
- Road or other traffic incident
- Workplace transport incident
- Exposure to substance or agent
- Hit by a moving or falling object
- Other

### Accident Location

- Internal
- External

### Annual Summary

- 2015/16: 32 accidents, 26 near misses, 38 hazards
1. Regulatory Dashboard

**i.) Fire Alarm activations** - During the year there were ten fire alarm activations, resulting in two ‘unwanted calls’ to the Scottish Fire and Rescue Service (SFRS). Three of these were actual fire incidents with one of those being the result of a reckless action to the landscaped area of the campus, while the other two were accidental related to SPS and ministerial staff.

60% of all calls were related to contractor failures resulting in three daytime evacuations totalling 45 minutes disruption but none affecting Parliamentary business. The system activations were as follows:

- 7 x Smoke Detector;
- 1 x Very Early Smoke Detection Apparatus (VESDA);
- 1 x Break Glass Call Point;
- 1 x Security staff via CCTV.
ii.) **Fire Safety Performance** – Throughout the year, all Fire Safety Risk Assessments, audits and surveys were completed without any major concerns.

2. **Health & Safety Steering Group - Fire KPIs**

*KPIFire1* – Number of primary fires over year.

*KPIFire2* – Number of ‘Unwanted’ calls to the Scottish Fire and Rescue Service (SFRS).

*KPIFire3* - Parliamentary Business Disruption caused by false alarm activations (in minutes).

*KPIFire4* - Fire Safety Performance:
  i) Number of Fire Safety Risk Assessments / Surveys completed over the year.
  ii) Number of occupants receiving additional specific fire safety training (i.e. over and above Induction and annual refresher training).
  iii) Number of SFRS Liaison Visits to The Scottish Parliament.

The table below gives some idea of recent activity in these areas.

<table>
<thead>
<tr>
<th>KPI</th>
<th>Description</th>
<th>Current Year (@ 06/10)</th>
<th>2015/16</th>
<th>2014/15</th>
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<tbody>
<tr>
<td>KPIFire1</td>
<td>Primary fires</td>
<td>0</td>
<td>2</td>
<td>0</td>
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<tr>
<td>KPIFire2</td>
<td>Unwanted calls to SFRS</td>
<td>6</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>KPIFire3</td>
<td>Parliamentary Business Disruption</td>
<td>0mins</td>
<td>0mins</td>
<td>0mins</td>
</tr>
<tr>
<td>KPIFire4</td>
<td>Fire Safety Performance:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>i) Risk Assessment / Survey</td>
<td>6</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>ii) Specific Training</td>
<td>31</td>
<td>0</td>
<td>60</td>
</tr>
<tr>
<td></td>
<td>iii) SFRS Liaison Visits</td>
<td>1</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Total Calls</td>
<td>Fire Incidents</td>
<td>10</td>
<td>10</td>
<td>10</td>
</tr>
</tbody>
</table>

3. **Training**

There were no requests during this year for any additional / specific fire safety training.

4. **Fire Evacuation Exercise Programme**

The first of our twice-yearly Fire Evacuation Exercises took place on 18<sup>th</sup> June when approximately 650 occupants were evacuated in around six minutes during a Full Campus Evacuation. Valuable feedback was provided by observers and other occupiers which has since guided further improvement of our fire safety management system.
The second exercise took place on 27th October involving the Upper Floors of Towers 3 & 4 (Zone 4), when around 80 occupants assembled in the Garden Lobby in four minutes and again observers and occupiers provided valuable feedback.

5. Fire and Rescue Service Liaison

There were five liaison visits by the Scottish Fire and Rescue Service (SFRS) over the past year but two of these were enforcement audits following fires on the premises. On a more positive note SFRS computer aided design (CAD) technicians visited us twice in order to facilitate improved 3D plan design for their Operational Intelligence Plan for our premises as part of their overall commitment towards the Scottish Government’s Critical National Infrastructure (CNI) strategy. Facilities Management have requested access to the 3D modelling upon completion in order to enhance our own building model for use at the Scottish Parliament. www.firescotland.gov.uk

6. Evac-Chair training for Security staff

Towards the end of the year two members from the security office were trained as trainers for the Evac-Chair with the intention of cascading that training down to the remainder of the Security Teams. This will provide an important resource for the assistance of mobility-impaired occupants / visitors in the event of a fire evacuation or some other types of medical emergency.

7. Fire Safety Information

Further information relating to fire safety at the Scottish Parliament is available at: http://www.scottish.parliament.uk/intranet/15041.aspx

Paul Graham CMIOSH, MIFireE
Fire Safety Advisor
Ext: 86915
Appendix 3: Changes to First Aid Procedure

In May 2016, a review of our first aid procedure was carried out, with the aim of making first aid instructions easier to understand and more focused on providing immediate assistance in medical emergencies. The new first aid procedure was published in May 2016, with awareness raising by email, through team meetings, staff briefings, and in the Corporate Bulletin.

In addition, the H&S Steering Group approved the inclusion of Medical Emergencies in the H&S Risk Register and agreed that the approach for carrying out periodic first aid needs assessments would be reviewed to ensure alignment with current official guidance.