

# ANNUAL HEALTH AND SAFETY REPORT

## 1 January 2021 – 31 December 2021

### 1. PURPOSE OF THE HEALTH AND SAFETY MEETING 2021

It is a requirement of the Health and Safety (Consultation with Employees) Regulations 1996 that PF consults the Local H&S Co-ordinators (non-managerial representatives) with regards to H&S issues that affect the Company and its employees.

This Report covers the period from the 1 January 2021 to the 31 December 2021.

The annual H&S Meeting is scheduled to take place on the 18 January 2022 at 10.00AM, by Teams call.

### 2. REVIEW OF OUTSTANDING ACTIONS FROM THE LAST MEETING

There are no outstanding actions from the last meeting.

### 3. THE DEGREE TO WHICH THE HEALTH & SAFETY OBJECTIVES/TARGETS AND IMPROVEMENTS HAVE BEEN ACHIEVED SINCE THE LAST MEETING

Objectives and targets set at 2021 Meeting	Objectives and targets achieved by 31 December 2021
Maintain certification to ISO45001: 2018 (5 offices)	Achieved
No prohibition notices or enforcement orders	Achieved
Reduce the PF All Accident Frequency Rate from 0.79 to 0.75 No PF Reportable Accidents (RIDDORS)	PF AFR = 0.60. Achieved Achieved
Zero non-conformity arising from Evaluation of Compliance with Legal & Other Requirements (H&S audits)	Not achieved. 8 internal audits performed & 3 CARs issued
Comply with H&S legislation and other applicable standards by: <ul style="list-style-type: none"> <li>➤ Monitoring changes in H&amp;S legislation and other standards and ensure that PF's register and processes are updated accordingly.</li> <li>➤ No enforcement notices.</li> <li>➤ Zero non-conformities from external auditors</li> </ul>	Achieved  Achieved Not achieved - 2 minor CARs issued by BSI and 7 CARs issued by RISQS
100% of First Few Days Induction Checklist and their LMS H&S training modules/tests; to be completed on time (within 30 days of joining the Company)	Not achieved – approximately 90% compliance achieved
100% of the refresher OLMS H&S training modules/tests; to be completed on time (within 30 days of the training account being set up)	Not achieved – approximately 80% compliance achieved

Improvements agreed at 2021 Meeting	Improvements achieved by 31 December 2021
Monthly LHSC tours and SLT Director/Office Principal accompanying the LHSC, once per quarter	Not achieved. Refer to section 7.1 of this Report.
Deputy Director tours every 6 months	This improvement could not be achieved due to Covid-19 pandemic and Central Government's Stay at Home guidance
H&S safety alerts via e-mails and H&S Awareness Briefings via INNOV8 Front Page	Achieved
H&S in Design Lessons Learnt via INNOV8 Front Page	Not achieved – no lessons learnt received in 2021. Being trialled by some PMs
H&S and Wellbeing Metrics to be reported each month	Achieved. Dashboard created and Metrics communicated to SLT each month
H&S to be an Agenda item at Management Meetings	Achieved

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H&S Moment to be discussed at the start of all PF meetings	Achieved
LMS – Working Away from the Office module to be launched (known as safety Awareness on Construction Sites)	Achieved
Create Teams People H&S Records folder	No longer required
Seek ISO45001: 2018 certifications for Nottingham, Luton, and Manchester offices	This improvement could not be achieved due to Covid-19 pandemic and Central Government's Stay at Home guidance
Convert Site Working Preliminary Checklists and Risk Assessments, Ladder Checks and LHSC Monthly Office H&S and Environmental Inspections templates into Microsoft Forms	Achieved
Link H&S performance to PDRs	Not achieved, discussions ongoing with HR

#### 4. REVIEW HEALTH & SAFETY POLICY

The Health & Safety Policy has been revised to meet the requirements of ISO45001: 2018. The Policy is linked to the Vision, Mission and Core Values.

#### **HEALTH AND SAFETY POLICY STATEMENT** **Health and Safety at Work etc. Act 1974**

*The Company's policy on health and safety applies to all companies in the Pell Frischmann Consulting Engineers Ltd group including any subsidiaries.*

*It is important that every employee is aware of his or her obligations under this Health and Safety Policy Statement, and any queries should be addressed to the Managing Director or the Deputy Health and Safety Director.*

*Our statement of general policy is:*

- *Promoting an environment where everyone makes safety personal and helps to create a zero-harm culture. The Company provides and maintains safe and healthy working conditions, equipment, and safe systems of work for all our employees, and to provide such information, instruction, supervision, and training, as they need for this purpose*
- *The Directors are committed to the prevention of work-related injury and ill health for our employees and others affected by our work and to the promotion of the health and wellbeing of our employees*
- *To ensure appropriate preventative and protective measures are implemented and maintained to eliminate or minimise any hazards and reduce health and safety risks to an acceptable level for our employees and others affected by our work, and the environment following the identification of work-related hazards and assessment of the risks related to them*
- *To be committed to fully consult our employees and employees' representatives and seek their participation on all matters affecting their health, safety, and wellbeing*
- *To acknowledge our responsibility for the health and safety of other persons who may be affected by our activities and the need to maintain an effective communication system between interested parties*
- *That evidence of professional safety management practice is and will remain a condition of our employment of third parties employed to assist with our operations*
- *To comply with all current applicable health and safety legislation and other relevant health and safety requirements that relate to our health and safety hazards*

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- *The ultimate responsibility for health and safety is with the Pell Frischmann Board who ensure that adequate financial and physical resources are provided to secure a safe and healthy working environment for our employees*
- *The Pell Frischmann Board is committed to this Policy and all staff are required to comply as a condition of their employment. They are encouraged to assist in the Pell Frischmann Board's further commitment to the continual improvement in our Health and Safety Management System and performance to improve our business*
- *To ensure continual improvement in our health and safety performance, health and safety objectives are set by the Leadership Team at Management Review*
- *This Policy will be reviewed annually or as required to ensure that it remains relevant and appropriate to the activities of the Company. The arrangements and processes for implementing this Policy are controlled through the Company's Business Management System*

### 5. UPDATING THE H&S DOCUMENTS WITHIN THE BMS

- The H&S Director signed the H&S Policy (ISO45001: 2018) on the 1 March 2021
- All H&S Work Instructions have been reviewed to ensure these meet the requirements of ISO45001: 2018
- The Register of Legal and Other Requirements was last reviewed on the 1 October 2021

### 6. H&S CONSEQUENCES OF NEW TECHNOLOGY INTRODUCTION

Analysis of working hours report, and business mileage incurred is 'live' information due to enhancements that have been made to Unit4 during 2021. This will enable PF to ensure it complies with relevant H&S Regulations.

ISO19650-2 (BIM) re-certification was achieved in December 2021, for Exeter, London, Wakefield, Bishops Stortford, and Birmingham offices. Once Manchester office achieves ISO9001: 2015 certification, it will then be added to the ISO19650-2: 2018 certification.

In time, all sectors will be working to BIM. BIM can be programmed to ensure that the project's Design Risk Assessment (DRA) and the Pre-construction H&S File are uploaded into the project library within the common data environment. Any design issues that are raised when the clash detection programme is run, will identify if the DRA, drawings, and the pre-construction H&S File requires further revision.

### 7. COMMUNICATION, PARTICIPATION AND CONSULTATION

The Company ensures that communication, consultation, and participation take place with all staff as follows:

- The Deputy H&S Director communicates H&S information to all staff through the LHSCs, directly by e-mail, Covid-19 and H&S Awareness Briefings on INNOV8 Home Page, and dealing with general matters that affect the H&S of staff
- LHSCs who are non-managerial workers attend the Annual H&S Committee Meeting. The meeting is held to ensure compliance with the Health and Safety (Consultation with Employee) Regulations 1996
- By seeking assistance in ensuring the Company appoints competent people to assist it with complying with H&S law
- H&S notice boards are used to communicate the H&S Policy and its objectives, local H&S issues and the names of the Deputy H&S Director, H&S Co-ordinator and the LHSC
- Issuing safety alerts
- Accident, incident, and close call investigation
- Office inspections
- H&S consequences of introducing new or changes to existing premises, products, services, processes, technologies, knowledge, or information being discussed
- H&S consequences of new and revised legal and other requirements being discussed

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- Changes in knowledge or information about H&S hazards and risks being discussed
- Establishing needs and expectations (requirements) of staff (managerial and non-managerial), clients and other relevant interested parties
- Determining what needs to be communicated and how this shall be done
- Assigning roles, responsibilities, and authorities
- In the development, review, and continual improvement of Policies and the BMS
- People development – induction and refresher training, Personal Development Reviews (competency, training, and objectives); H&S, BMS and job-related training, and career development
- Participation in risk assessments and method statements, to identify and eliminate aspects and hazards and to reduce impacts and risks
- Staff presentation and meetings with staff via Teams throughout 2021, sectors, management teams
- Suggestion scheme on INNOV8
- Internal audit programme, internal audits, non-conformities and corrective actions including evaluating the need for these
- Management Review inputs and outputs

**7.1 MONTHLY LHSC TOURS AND SLT DIRECTOR/OFFICE PRINCIPAL TOURS IN 2021**

Office	LHSC Tours	SLT Director/Office Principal Tours with LHSC	Comments
Birmingham	7	3	LHSC tours have taken place each month since May 2021. SLT/OP tours in May, August, and November 2021.
Bishops Stortford	3	0	Office re-opened in September 2021, LHSC tours in September, October, and November 2021.
Edinburgh	0	0	No office, as all staff are permanent homeworkers.
Exeter	4	1	LHSC tours in April, September, October, and November 2021. SLT/OP tour in September 2021.
London	0	0	London (Manchester Square) office has been closed throughout 2021, the lease for the new office at 85 Strand was signed in December 2021 – staff have not yet moved into the new office.
Luton	3	0	LHSC tours in August, October, and December 2021.
Manchester	4	2	LHSC tours in May, September, October, and November 2021. SLT/OP tour in May and November 2021.
Nottingham	1	1	LHSC tour in September 2021. SLT/OP tour in September 2021.
Wakefield	3	2	One tour of old office in May 2021 and in new office in October and November 2021. SLT/OP tours in May and November 2021.
Total	25	9	

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**8. INTRODUCTION OF MEASURES THAT MAY AFFECT H&S AND ARRANGEMENTS FOR COMPETENT H&S ADVICE**

To satisfy the requirements of the Management of H&S at Work Regulations 1999 as amended 2006; the Company has appointed:

- Caroline Roche as the Company's H&S Co-ordinator provides general, occupational health and construction H&S advice
- Philip Johnson provides rail H&S advice

H&S Audits of all PF offices are performed by the H&S Co-ordinator (Caroline Roche).

The Local H&S Co-ordinators (LHSCs) continue to undertake their roles and fulfil their responsibilities with regards to H&S.

**9. INTERNAL HEALTH AND SAFETY AUDITS**

Eight internal H&S audits were performed between the 1 January 2021 and 31 December 2021 resulting in 3 CARs being issued (6 audits resulting in 6 CARs being issued during 2020). Average CARs Per Audit KPI = 0.375 (2020 = 1.00).

Internal Audits	Bir	BS	Exe	Lon	Man	Wak	Total
Total	1 (1)	2 (1)	1 (1)	1 (1)	1 (1)	2 (1)	8 (6)

Comparison of the CARs issued in 2020 (in brackets) versus 2021 are as follows:

CAR	Bir	BS	Exe	Lon	Man	Wak	Total
G&A modules/tests outstanding	0 (0)	0 (0)	0 (0)	1 (0)	0 (0)	2 (0)	3 (0)
Supplier management	0 (0)	0 (1)	0 (0)	0 (1)	0 (0)	0 (0)	0 (2)
Workplace Environment	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	0 (1)	0 (2)
DSE RAs overdue	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (1)
NICEIC certificate out of date	0 (0)	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)
Total	0 (0)	0 (2)	0 (0)	1 (3)	0 (0)	2 (1)	3 (6)

Legal compliance has not been met as proved by the three CARs noted above. These CARs are followed up to ensure close out and are also considered when the next internal H&S audit is performed in the respective office.

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### Control of Records

It is a requirement of ISO45001: 2018 that H&S records required by PF are identified, available for use, and retained as required. Comparison of the Observations issued in 2020 (in brackets) versus 2021 are as follows:

Observation	Bir	BS	Exe	Lon	Man	Wak	Total
Landlords records not requested. Asbestos Management Plans Communal area RA Cleaning company RA/COSHH Legionella RA Fire RA Gas boiler NECEIC certificate LOLER certificate/service Waste Transfer Notes	6 (6)	10 (1)	2 (0)	0 (0)	4 (8)	1 (0)	23 (15)
PF records not up to date/recorded: Cleaner's Public Liability Insurance DSE Assessments not completed Emergency lighting tests Legionella RA LHSC tours LOLER certificate/service New Mother RA NICEIC certificate out of date PAT records not up to date PPE not registered Suppliers H&S records WEEE records	0 (3)	9 (1)	0 (2)	1 (4)	0 (1)	3 (3)	13 (14)
<b>Total</b>	<b>6 (9)</b>	<b>19 (2)</b>	<b>2 (2)</b>	<b>1 (4)</b>	<b>4 (9)</b>	<b>4 (3)</b>	<b>36 (29)</b>

## 10. REVIEW EXTERNAL AUDITS

### BSI Audits

The ISO45001: 2018 certification has been maintained for PF's 5 UK offices during the year.

Eight audits had taken place resulting in 2 Minor CARs being issued (8 audits resulted in 3 Minor CARs being issued in 2020).

BSI Audits	Bir	BS	Exe	Lon	Wak	Total
<b>Total</b>	<b>1 (1)</b>	<b>1 (1)</b>	<b>2 (2)</b>	<b>1 (2)</b>	<b>2 (2)</b>	<b>7 (8)</b>

The London BSI Audit which was due in October 2021 was delayed, due to the office relocation from Manchester Square to 85 Strand and is now booked for the 25 and 26 January 2022.

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The Average CARs Per Audit KPI = 0.125 (2020 = 0.375). The reasons for the CARs are as follows:

BSI CAR	Bir	BS	Exe	Lon	Wak	Total
Supplier RAMS did not include all task hazards	0 (0)	0 (0)	1 (0)	0 (0)	0 (0)	1 (0)
Suppliers competence records not obtained prior to undertaking safety critical work	0 (0)	0 (0)	1 (0)	0 (0)	0 (0)	1 (0)
DSE H&S Training outstanding for some time	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (1)
Site Preliminary Checklist/Risk Assessment not completed prior to site visit	0 (1)	0 (1)	0 (0)	0 (0)	0 (0)	0 (2)
Accident/incident unique reference numbers not recorded correctly	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Total	0 (1)	0 (1)	2 (1)	0 (0)	0 (0)	2 (3)

### Achilles UVDB and RISQS Audits

During the year, the Achilles UVDB audit took place at the Exeter office on the 30 September 2021. The score was 100% for quality, environment, and H&S.

The RISQS audit took place at the Bishops Stortford office from the 13 to 15 September 2021. Seven H&S Corrective Actions were issued during this audit (see below table) – these are still awaiting closeout.

RISQS CAR	Non-conformity
Legal and Other Requirements Register	The Register did not list NR Standards that apply to the Company
Policies	The Drugs, Alcohol and Substance Abuse Policy does not contain a commitment by the Managing Director to announced drugs and alcohol testing.  The Whistleblowing Policy does not include a reference to CIRAS (Network Rail confidential reporting system)
PPE	The Bishops Stortford PPE Register indicated that a number of hard hats were issued over 5 years ago and had not been replaced. Centralised PPE Register maintained by Birmingham office was not available to view
Management of Close Calls, Near Misses, Accident and Incident Investigation	The new investigation form did not evidence all the details that could pertain to a close call, near miss, accident or incident. E.g weather conditions, underfoot conditions, working hours, lack of training, distractions, working under pressure, working hours etc
Fatigue Management	No evidence could be provided that the Company monitors the working hours of rail sector staff using the Sentinel Swip In/Swipe Out system
Internal Audits	An internal rail sector audit is to be recorded
Occupational Health	Although a risk assessment was in place for an individual with a level 2 medical (hearing loss), the control measures in place were insufficient

### 11. IDENTIFICATION OF H&S DEPARTMENT RESOURCE NEEDS

The necessary resources are provided by the H&S Director, the H&S Co-ordinator, Rail H&S Co-ordinator, and Local H&S Co-ordinators.

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## 12. HEALTH & SAFETY ACCIDENTS/INCIDENTS/CLOSE CALLS

There was no PF Reportable Accidents (RIDDORs) in 2021 (0 in 2020). The Reportable AFR is zero. There have been 4 accidents recorded for PF during 2021 (5 accidents in 2020). The All-Accident Frequency Rate is 0.60 (2020 = 0.79). These were:

Accident	Bir	BS	Cro	Edin	Exe	Lon	Lut	Man	Notts	Wak	PFI	Total
Awkward leg movement	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)
Trip on same level	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	1 (0)	0 (0)	1 (1)
Scald to arm	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)
Fell off chair whilst working at home	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)
Cut finger	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Trapped finger	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	2 (0)	2 (1)
Total	0 (1)	0 (0)	0 (1)	0 (0)	0 (1)	0 (2)	0 (0)	0 (0)	0 (0)	1 (0)	2 (0)	3 (5)

Desco's and 4Way's Accident Frequency Rates are confirmed as zero for 2021.

There has been 1 incident recorded during 2021 (1 incident in 2020). This was:

Incident	Bir	BS	Cro	Edin	Exe	Lon	Lut	Man	Notts	Wak	PFI	Total
Trip on stairs causing coffee that was being carried to spill	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)
Animal bones dug up by subcontractor employed directly by MMA client	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	1 (0)	0 (0)	1 (0)
Total	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	1 (0)	0 (0)	1 (1)

Five close calls were recorded in 2021 (1 in 2020) which were:

- Birmingham: Noise Survey Team were delayed by 24 hours from going to a 'live' highway site and unfortunately did not advised the client accordingly
- Birmingham: Environment – exclusion fence at badger sett was built incorrectly which did not allow a badger to egress from a particular gate
- Exeter: employee was not wearing any PPE during a site visit even though he knew he had to, client had to ask employee to leave site
- Nottingham: a PF female employee was travelling on a train from Nottingham to London, the train was waiting at a platform when a men got on and sat down next to the PF female employee. The man behaved inappropriately, the female employee moved seat to sit next to another lady but the man's behaviour deteriorated further and they tried to move carriage, but the man then assaulted the other lady. The Police were called, they arrested the man who was found to be intoxicated
- PFI: employee suffered a nosebleed due to previous outside of work injury to nose. Taken to hospital for further treatment

Any necessary corrective actions from accidents, incidents and close calls have been implemented. Full details of accident, incident and close call investigation can be seen on INNOV8 in Microsoft Forms.



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### 13. IDENTIFICATION OF HEALTH & SAFETY TRAINING NEEDS

It is a requirement of the Management of Health and Safety at Work Regulations 1999 as amended 2006 and ISO45001: 2018 that all PF staffs receive adequate training. This is achieved through:

- New starters when they join PF have received induction H&S training provided by the LMS
- Induction upon joining the Company and training identified in Personal Development Reviews
- Refresher LMS training provided every three years
- Training identified as the need arises e.g project requirements, changes in legislation, planned/new activities for the Company
- Emergency response practices such as the annual planned fire drills of all offices and unplanned emergency evacuations, as these arise. Records of the fire drills and emergency evacuations are maintained by Office Managers and any lessons learnt are communicated to staff

### 14. SUGGESTED HEALTH AND SAFETY IMPROVEMENTS FOR 2022

These are:

- BMS
  - Convert word-based H&S Forms into digital Microsoft Forms
  - Review and simplify H&S risk assessments and method statements
  - Digitise H&S site issues and checking in/out whilst working away from the office/home
- Certifications
  - Seek ISO45001: 2018 certification for Manchester office - achieving this will depend on the Covid-19 pandemic
- Communications
  - Senior Leadership Team/Office Principal to accompany LHSCs on 4 walkarounds per annum and engage in H&S discussions with employees during these walkarounds
  - Two H&S Lunch and Learn sessions (replacing Deputy H&S Director tours)
- Control of Records
  - Improve Teams Buildings H&S Compliance, so that in date records are available when required
- Training
  - Review LMS Onboarding modules and H&S references within these
  - H&S for Homeworkers LMS module – create a video of specific Homeworking advice and link video to LMS H&S Essentials module. H&S for Homeworkers LMS module to be withdrawn thereafter
  - Practice What if Scenarios (first aid)
  - Link individual H&S performance to PDRs
- Wellbeing
  - Review ISO45003 Management of Psychosocial H&S at Work with regards to Covid-19 and staff's mental health
  - Implement Behavioural Safety Initiatives

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## 15. SET HEALTH & SAFETY OBJECTIVES, TARGETS & PROGRAMME FOR 2022

Health and Safety Objectives	Action Required to achieve objective	Target date	Responsible
<p>Everyone makes safety personal and helps create a zero-harm culture.</p>	<p>H&amp;S alerts issued</p> <p>H&amp;S Policy issued to all staff via INNOV8 BMS</p> <p>Ensure LHSC inspections are carried out every month and deficiencies are dealt with within three months. Any outstanding deficiencies are then escalated to the H&amp;S Co-ordinator</p> <p>Quarterly walk rounds in office undertaken and recorded</p> <p>Six monthly walk arounds in office undertaken and recorded</p> <p>100% of First Few Days Induction Checklist and the LMS H&amp;S modules/tests to be completed within 30 days of joining PF</p> <p>100% of the refresher LMS H&amp;S modules/tests every three years; to be completed within 30 days of renewal notification being issued</p> <p>Issue monthly H&amp;S and Wellbeing Metrics</p> <p>Ensure that all aspects of the PF H&amp;S management system are complied with</p>	<p>31 December 2022</p>	<p>Deputy H&amp;S Director/ H&amp;S Co-ordinator</p> <p>H&amp;S Co-ordinator</p> <p>LHSC/Office Principals/ H&amp;S Co-ordinator</p> <p>Office Principals &amp; LHSCs</p> <p>LHSC &amp; H&amp;S Director or BUDS</p> <p>All new starters</p> <p>All staff</p> <p>Deputy H&amp;S Director</p> <p>All staff</p>
<p>Comply with H&amp;S legislation and other applicable standards</p> <p>Zero non-conformity arising from Evaluation of Compliance with Legal &amp; Other Requirements.</p> <p>No prohibition notices or enforcement orders.</p> <p>No occupational health complaints.</p> <p>No client and relevant other interested parties' complaints.</p>	<p>Monitor changes in H&amp;S legislation and other standards and ensure that PF's register and processes are updated accordingly.</p> <p>No H&amp;S CARs issued by BSI</p> <p>Ensure that all aspects of the PF H&amp;S management system are complied with</p> <p>Monthly LHSC inspections and deficiencies addressed</p> <p>Internal audits</p> <p>Mentoring and training as required</p>	<p>31 December 2022</p>	<p>H&amp;S Co-ordinator</p> <p>Office Principals/All staff</p> <p>All staff</p> <p>Office Principals/LHSCs</p> <p>H&amp;S Co-ordinator</p> <p>Office Principals/All staff</p>

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Health and Safety Objectives	Action Required to achieve objective	Target date	Responsible
	Issue monthly H&S and Wellbeing Metrics		Deputy H&S Director
<b>Health and Safety Objectives</b>	<b>Action Required to achieve objective</b>	<b>Target date</b>	<b>Responsible</b>
Maintain ISO45001: 2018 Certification for Exeter, London, Wakefield, Birmingham, and Bishops Stortford offices Seek ISO45001: 2018 Certification for Manchester office	Ensure those offices on the certificate and Manchester office are following all aspects of the PF H&S management system  No H&S CARs issued by BSI	31 December 2022	Office Principals/All staff  Office Principals/All staff H&S Co-ordinator
Prevention or work-related injury and ill health  Maintain PF Accident Frequency Rate at 0.60.  Zero RIDDOR accidents.	Occupational Health Work Instruction issued  Ensure that all aspects of the PF H&S management system are complied with  Hazards are identified, and appropriate risk assessments are in place  100% of First Few Days Induction Checklist and LMS H&S modules/tests to be completed within 30 days of joining PF  100% of the refresher LMS H&S modules/tests; to be completed within 30 days of renewal notification being issued. Refresher training takes place every 3 years  Quarterly walk rounds in office undertaken and recorded by SLT and Office Principals  Health surveillance implemented, if required  Issue monthly H&S and Wellbeing Metrics  Ensure that LHSCs are in place and are fulfilling their roles  Ensure LHSC inspections are carried out every month and deficiencies are dealt with within three months. Any outstanding deficiencies are then escalated to the H&S Co-ordinator	31 December 2022	H&S Co-ordinator  All staff  H&S Co-ordinator  All staff  LHSCs/Office Principals  LHSCs & Office Principals  LHSC & H&S Director or BUDS  Deputy H&S Director  Office Principals  Office Principals/LHSCs H&S Co-ordinator All staff

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Health and Safety Objectives	Action Required to achieve objective	Target date	Responsible
<p>Reduce the number of internal CARs and Observations raised for:</p> <ul style="list-style-type: none"> <li>➤ H&amp;S Training – LMS Initial/Refresher Training to be completed within 30 days. <b>Zero CARs</b></li> <li>➤ Control of H&amp;S records. <b>Zero Observations</b></li> </ul>	<p>Internal audits</p> <p>100% of internal CARs raised are closed out by the target date</p> <p>Mentoring and training as required</p> <p>Ensure that all aspects of the PF H&amp;S management system are complied with</p> <p>H&amp;S Evaluation of Legal Compliance Audit in PF's offices</p> <p>Issue monthly H&amp;S and Wellbeing Metrics</p>	31 December 2022	<p>Office Principals/LHSCs H&amp;S Co-ordinator All staff</p> <p>Deputy H&amp;S Director</p>
<p>Consult employees and seek their views on all matters affecting their H&amp;S.</p> <ul style="list-style-type: none"> <li>➤ Two Lunch and Learns (replaces Deputy H&amp;S Director tours): <ul style="list-style-type: none"> <li>• H&amp;S Duties and Responsibilities or</li> <li>• CDM2015 or</li> <li>• Occupational Health and Wellbeing</li> </ul> </li> <li>➤ 6 H&amp;S Awareness Briefings</li> <li>➤ Senior Leadership Team/Office Principals office tours with their respective LHSC - 1 walkaround per quarter</li> </ul>	<p>Online company-wide Staff Presentation</p> <p>Annual meeting with LHSCs</p> <p>Deputy H&amp;S Director to distribute questionnaire to LHSCs seeking their feedback on H&amp;S before meeting</p> <p>Consultation and participation with all staff regarding any H&amp;S concerns – office tours by SLT/Office Principals</p> <p>SLT/Business Unit/Department meetings - safety moment at start of each meeting – to be recorded in meeting notes</p>	31 December 2022	<p>Office Principals</p> <p>Deputy H&amp;S Director, H&amp;S Co-ordinator, LHSCs &amp; BUDs/Office Principals</p>
<p>Safety management practice is a condition of employing third parties to assist with our operations.</p>	<p>Subcontractor, Off-Payroll Worker and Agents Management Work Instruction issued</p> <p>Supplier Management Work Instruction issued</p> <p>List of Approved Subcontractors and Unit4 maintained</p> <p>Internal subcontractor management audits performed</p>	31 December 2022	<p>All staff</p> <p>H&amp;S Co-ordinator</p> <p>H&amp;S Co-ordinator</p>