## **North Yorkshire County Council**

#### **Business and Environmental Services**

## Transport, Economy and Environment Overview and Scrutiny Committee

## 20 July 2017

## Ringway Performance - 2016/17

## Report of the Corporate Director – Business and Environmental services

## 1.0 Purpose of Report

1.1 The purpose of this report is to advise Members of Ringway's performance under the Highways Maintenance Contract (HMC) 2012 during the period 1 April 2016 – 31 March 2017 and of the outcome of the Evaluation Panel held on 24 May 2017.

## 2.0 Background

- 2.1 Following a lengthy and robust procurement exercise, HMC 2012 was awarded to Ringway (RIS) and the contract commenced on 1 April 2012.
- 2.2 As part of the Contract, an Evaluation Panel is held annually in May to determine the Term of the Contract, which is informed by the Contract Performance Indicators (CPIs). The CPIs comprise Primary Performance indicators (PPIs) and Secondary Performance Indicators (SPIs). It is the PPIs which directly affect the Term of the Contract, although the SPIs can also be taken into consideration. The Evaluation Panel is also asked to support the implementation of the rolling third year CPI targets, together with any interim amendments.
- 2.3 The maximum term of the Contract is 10 years; the minimum term is 6 years. The contract has a 'Claw Back' and a 'Win Back' mechanism, whereby any years clawed back for poor performance can subsequently be won back for good performance.
- 2.4 The contract period was reduced by one year at the Evaluation Panel meeting held on the 22nd May 2014.
- 2.5 At the Evaluation Panel held on 24 May 2017, the decision was taken to keep the term of the Contract at 9 years with a Contract completion date of 31 March 2021.

# Evaluation Panel – 24 May 2017

- 2.6 The 2017 Evaluation Panel considered the performance of RIS for the period 1 April 2016-31 March 2017. The performance for this period was that the required targets for 10 out of 12 Primary Performance Indicators (PPIs) and 7 out of 10 Secondary Performance Indicators (SPIs) were met. This compares with the same period in 2015/16 where 14 out of 15 Primary Performance Indicators (PPIs) and 9 out of 11 Secondary Performance Indicators (SPIs) were met.
- 2.7 It should be noted that Ringway's performance for 2016/17 has been measured against a new Performance Management Framework which has a reduced number of indicators.

2.8 Based on what was considered to be an acceptable level of performance, the Panel took the decision to retain the Term of the contract as 9 years, until 31 March 2021.

## Challenge/Scrutiny

- 2.9 Through the HMC 2012 Governance arrangements, Ringway's performance is scrutinised throughout the year at the monthly Operational Management Group (OMG), quarterly Strategic Management Group (SMG) and 6 monthly Partnering Steering Group (PSG) meetings.
- 2.10 Since the first HMC 2012 Evaluation Panel, Ringway's performance has been further scrutinised by Members at:
  - Transport, Economy and Environment Overview and Scrutiny Committee (TEE OSC) 17 July 2013
  - BES Executive Members (with County Councillor David Jeffels in attendance as Chairman of TEE OSC) – 27 November 2013
  - TEE OSC 22 January 2014
  - TEE OSC 16 July 2014
  - TEE OSC 21 January 2015
  - TEE OSC 14 October 2015
  - TEE OSC 27 July 2016

#### 3.0 Consideration

- 3.1 RIS has demonstrated an acceptable level of performance since the last report.

  Appendix A details the overall performance for the financial year 2016/17 compared to the previous year.
- 3.2 The revised Performance Management Framework includes measures relating to 'Completion in time of option B' (minor works) (OB7, OB30 & OB90). These new measures had been operating under a trial period for the majority of 2016/17 and therefore could not be considered to represent a full year's performance. Consequently they have been monitored for management purposes only during 2016/17 but are now fully operational as PPIs for 2017/18.
- 3.3 Appendix B details the 'Rectification Action Plans' presented to the Panel relating to those indicators were the required Target was not met.

## 4.0 Legal Implications

- 4.1 The requirement for an Annual Review of HMC 2012 is stipulated in the contract documents and shall be completed before 1 June in each Contract Year.
- 4.2 The Key Decisions associated with the Evaluation Panel held in this and in previous years have been published on the County Council's Statutory Forward Plan in accordance with its Constitution.

#### 5.0 Equalities Impact Assessment

5.1 Consideration has been given to the relevance of equality and diversity issues in each of the Evaluation Panel meetings. It was the view of officers that the recommendations had no impact on any of the protected characteristics identified in the Equalities Act 2010.

5.2 An Equalities Impact Assessment (EIA) for HMC 2012 has been developed jointly with Ringway and was reviewed and updated in June 2016. The next review is due to take place in June 2018.

## 6.0 Finance Implications

- 6.1 Over the first five years of HMC 2012, approximately £244 million of work has been delivered to date.
- 6.2 As part of HMC 2012, there is one specific CPI directly relating to finance:
  - SPI S06 Value of Gain Achieved

## 7.0 Recommendation

- 7.1 It is recommended that Members:
  - i) note the contents of this report and the attached appendices

## **DAVID BOWE**

Corporate Director Business and Environmental Services

Author of Report: Andrew Binner

**Background Documents: None** 

# Appendix A Summary of PPI Scores for 2016-17

		P	rimary Perfo	rmance Indicators	(PPIs)			
				Performance				
Reference No.	PPI	Measure	2016/17			Technical Notes		5/16
			Target Actual Pas		Pass/Fail		Performance	
VINTER MAINTE	NANCE:							
		Max no. scores <10	9	0.00	Pass		Pass	0.00
		Average score (based on 42 returns)	10	10.00	Pass		Pass	10.00
	Client Satisfaction	Max total no. failure points	52	0.00	Pass		Pass	0.00
PPI WM01	-Winter Maintenance	Max no. 1 pt deductions	9	0.00	Pass		Pass	0.00
	Gritting Routes	Max no. 3 pt deductions	6	0.00	Pass		Pass	0.00
		Max no. 5 pt deductions	4	0.00	Pass		Pass	0.00
				Overall Performance	Pass		Pass	
PPI S01	Start on Time	% on time or better	90%	85.03%	Fail	All allocation of party responsible for delays taken as having been agreed by operational teams. Of the 314 schemes programmed to start 267 were started on time	Pass	95.11
PPI S02	Finish on Time	% on time or better	88%	80.70%	Fail	All allocation of party responsible for delays taken as having been agreed by operational teams. Of the 316 schemes programmed to finish, 255 were finished on time. 61 were not	Pass	95.54
		Number of completed works orders that require works notices as a % based on a random sample	90%	90.32%	Pass	Based on NYCC data, of 1,632 sampled instructions requiring a notice, 1,474 had a notice.	Fail	74.87
PPI SO4	Street works Noticing	Number of compliant notices	90%	90.19%	Pass	Based on NYCC data, of the 53,681 notices, 48,415 have been compliant. 5,266 were not compliant.	Pass	90.37
		Number of notices that over run the proposaed notice end date	8%	3.60%	Pass	Based on NYCC data, there have been 19,062 closed notices, 687 have been overruns with a total of 14,375 days.	Pass	3.179
				Overall Performance	Pass		Fail	

				Performance				
Reference No.	PPI	Measure		2016/17		Technical Notes	-	5/16
			Target	Actual	Pass/Fail	1	Performance	
		nd weed killing, gully emptying, street I ntenance, pothole repair, drainage repa	0 0		e including			
PPI RMO5	Road Markings	% Completion of road marking schemes within deadline	84%	93.31%	Pass	Based on RIS data, of the 478 beds which have been lined, 446 were lined in time.	Pass	86.96%
PPI RMO6	Achievement of Programme – Surface Dressing	% Completion of surface dressing programme by 15 <sup>th</sup> August, annually.	97%	100.00%	Pass	3,202,677 of the programmed 3,202,677 surface dressing beds have been completed. 3,202,677 of this is prior to 15th August.	Pass	100%
PPI RMO8	Highway Dangerous Defects CAT 1	% of dangerous defects made safe within 24 hours of identification	99%	99.63%	Pass	800 instructions that have been raised, of those 797 were completed in time.	Pass	99.71%
PPI RM09	Completion on Time – Emergency Call Outs	% on time	99%	100.00%	Pass	1,789 instructions that have been raised, of those 1,789 were completed in time.	Pass	99.96%
PPI OB7	Completion in time option B (minor works) 7 day response	Number of jobs completed as % of those planned to be completed.	80%	60.89%	N/A	Of the 2,685 instructions 1,635 were completed on time, or commenced on time and were completed within a timely manner.	Not Applica scoring me	
PPI OB8	Completion in time option B (minor works) 30 day response	Number of jobs completed as % of those planned to be completed.	85%	62.87%	N/A	Of the 525 instructions 376 were completed on time, or commenced on time and were completed within a timely manner.	Not Applica scoring me	
PPI OB9	Completion in time option B (minor works) 3 month response	Number of jobs completed as % of those planned to be completed.	90%	74.75%	N/A	Of the 1,632 instructions 1,220 were completed on time, or commenced on time and were completed within a timely manner.	Not Applica scoring me	

Primary Performance Indicators (PPIs)											
				Performance			2011	F /1/			
Reference No.	PPI	Measure		2016/17		Technical Notes	_	5/16 mance			
			Target	Actual	Pass/Fail		renomiano				
FLEET MAINTENA	ANCE (Maintenance of th	e County council's vehicle fleet and mai	nagement of th	ne fuel supply and s	torage facilitie	s):					
PPI FM01	Compliance with Servicing Schedule	% Completion of servicing within deadline	94%	100.00%	Pass	Of the 574 services carried out 574 have been carried out as planned.	Pass	100.00%			
PPI FM02	MOT Pass Rate	% of MOTs passed	97%	100.00%	Pass	Of the 102 MOT's carried out, 0 have failed.	Pass	98.06%			
STREET LIGHTING	G MAINTENANCE [if inclu	uded in final contract]									
PPI SLO1	Street Lighting Fault Repair	% of defects repaired within 7 days	96%	99.94%	Pass	To date 4,792 seven-day repairs have been received and 3 have not been completed on time.	Pass	99.89%			
PPI SLO2	Achievement of Programme – Street Lighting Cyclical Maintenance	Max no. days ahead / behind schedule	8	1.97	Pass		Pass	1.11			

# Summary of SPI Scores for 2016-17

		Se	condary Per	formance Indica	tors (SPIs)			
	(Only to be taken acco	unt of by the Evaluation Panel on failur	e of one or m	ore of the PPIs. T	o be considere	ed as part of "NYCC's discretion"):		
				Performance				
Reference No.	SPI	Measure		2016/17		Technical Notes	2015/16 Performance	
			Target	Actual	Pass/Fail			
SCHEMES								
SPI S03	Defects – Impact at Handover	% schemes defect free at handover	90.00%	99.05%	Pass	316 schemes have been handed over defect free, with 3 having a defect outstanding	Pass	100.00%
SPI S06	Value of Gain Achieved	Value of pain + gain	>£0.00	-£ 21,630.69	Pass	Of the 264 CF12's (formerly CP06's) believed to be due, 75 have been returned. 38 of which are in gain, and 33 are in pain.  Provisional figures are calculated from cost reports submitted by RIS. Of the 264 believed to be due, 120 have been submitted along with a further 0. Of these, 55 are in gain, and 63 are in pain.	Fail	£ 6,596.58
		ing and weed killing, gully emptying, str epair, tree maintenance, pothole repair,						
SPI RM02	Achievement of Programme – Grass Cutting Rural	% of rural grass cutting routes completed within 14 calendar days of programme	97%	100.00%	Pass	180 'villages' have been programmed to be cut of which 180 were cut in time.	Pass	100.00%
SPI RM03	Achievement of Programme –Weed Spraying	% of weed spraying routes completed within 14 calendar days of programme	97%	99.54%	Pass	1,307 sites have been treated, 1,301 were within time.	Pass	100.00%
SPI RM04	Achievement of Programme – Gully Emptying	% of gullies cleaned within 14 calendar days of scheduled cleanse	97%	92.79%	Fail	125,878 gullies have been programmed to be cleaned of those 119,974 have been cleaned within time.	Pass	96.94%
SPI RM07	Defects	Max No. of Defect Notices issued	165	4	Pass	4 defects have been received	Pass	4
HEALTH AN	D SAFETY:			•				
SPI HS01	LTIFR (Lost Time Through Injury Frequency Rate)	Number of lost time incidents per 1,000,000 hours worked	2.50	2.69	Fail	A total of 742,347 hours have been recorded. 2 lost time incidents have been recorded.	Fail	5.39

	(Only to be taken asses		-	ormance Indica		ad as part of #NVCC/s discretion#1.			
	(Only to be taken accord	unt of by the Evaluation Panel on failur	e or one or mor	Performance	o be considere	ad as part of "NYCC's discretion"):			
Reference No.	SPI	Measure		2016/17		Technical Notes	2015/16 Performance		
			Target Actual Pass/Fail				renormance		
PUBLIC AND	CLIENT SATISFACTION	ı							
SPI PCS01	Public Satisfaction – All Schemes	% satisfied or very satisfied	90%	87.39%	Fail	666 cards have been returned of which 582 were satisfactory or better. To date 1,619 cards have been posted out.	Pass	90.99%	
		A - % Satisfaction Management of the Contract	85%	86.27%	Pass		Fail	60.97%	
SPI PCS05	Annual Client Survey	B - % Satisfaction Service Provision	85%	91.93%	Pass		Pass	89.28%	
		Overa	ll Performance	89.25%	Pass		Pass	75.13%	
CONTRACTO	DR – SELF EVALUATION	AGAINST ANNUAL ACTION PLAN							
SPI AAPO1	Contractor Progress against Annual Action Plan – self evaluation	% actions complete against Annual Action Plan	90%	100.00%	Pass		Pass	91.07%	



ACTION REPORT FORM PROCESS OWNER: Group IMS Manager

Issue: 5A

Date: August 2011

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Section 1

**Business Ref: RIS** 

Division and/or Location: North Yorkshire

Action Report No: RAP

Section 2

Issued by: P Jepps	Issued to: North Yorkshire	Date: 1/4/2017
Contract Number: MU 5382	Works Order Number: N/A	Delivery Note Number: N/A

#### Section 3 DESCRIPTION OF ISSUE

Failure of Performance Indicator PPI S01 Scheme Start on time

#### Section 4 STATE THE ROOT CAUSE OF THE ISSUE

There were two key factors in this failure:

- Our internal local area teams did not follow the correct process which led to local agreements
  not being fully documented and the correct documentation being received to mitigate why a
  scheme could not commence on the programmed date.
- 2. The client local team did not follow process in requesting and providing the correct documentation to demonstrate why a scheme could not commence as programmed and therefore mitigate this PPI.
- 3. Poor contract administration and inaccurate record keeping. (EW/PMI/CE)

## Section 5 WHAT ACTION IS PLANNEDTO ADDRESS THE ABOVE ROOT CAUSE?

# 5a CORRECTIVE ACTION (To address the issue)

The following corrective actions have been put in place to ensure this failure does not reoccur:

- 1. The programme is monitored in more detail and a three week look ahead is published on a weekly basis
- 2. The process for dealing with any change to a scheme that will affect either the Start and/or Finish dates has been rolled out again to all teams.
- 3. Any documentation provided as mitigation i.e. EWN, PMI, CE, Emails, is to be stored within the scheme electronic file.
- 4. If an unplanned event occurs meaning that within the lock down period of three months prior to the commencement of the works the start date needs to be moved, then the mitigations and supporting documents have to be sent for approval to the RIS Operations Manager for approval.

# 5b PREVENTIVE ACTION (To prevent recurrence)

- Administer documents relating to mitigation in the month the scheme date changes
- 2. Record the schemes effected by a change in the CE document and include the linked programme to show this.
- RESPONSIBILITY CHART REQUIRED (PAGE 2)?

Note: When you have completed this section please send copy to originator.

Section 6 CONFIRM ACTION HAS BEEN IMPLEMENTED (Supply supporting evidence)

Attach copy of 3 week look ahead programme.

Attach copies of the mitigation for the one scheme that has had to change so far.

Action closed by:

Date:



ACTION REPORT FORM PROCESS OWNER: Group IMS Manager

Issue: 5A Date: August 2011 Page 2 of 2

**Business Ref:** 

Division and/or Location:

Action Report No:

Date F	Prepared:	F	les	oon	sib	ility	of:	P Jepps		
Impro	vement/Concern			Per	soı	ıs I	nvo	lved		
Planne Task No	d Completion Date:	Steve Fox	Richard Whiteber	Contract Menan	Local DIC topics	Local Client teams	Mike Francis		By When	Complete
1	Monitor programme and produce three week look ahead	1	Х						Ongoing until APR 18	
2	Process rollout for dealing with change to start and/or finish dates			х		Х			31/3/2017	Υ
3	Storing of documentation i.e. PMI's EWN's etc.				х	1			Ongoing until APR 18	
4	Approval from RIS op's manager			i	Х		ı		Ongoing until APR 18	
5	Validate monthly (have any mitigation documents available for the monthly validation meeting)		Х	1	1				Ongoing until APR 18	ī
6										
Note	ONLY ONE PERSON CAN BE RESPONSIBLE, I = INVOL			R	AN A	ACT	TIVIT	Υ		



PROCESS OWNER: Group **ACTION REPORT FORM IMS Manager** 

Issue: 5A

Date: August 2011

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Section 1

**Business Ref: RIS** 

Division and/or Location: North Yorkshire

Action Report No: RAP

Section 2

Issued by: P Jepps	Issued to: North Yorkshire	Date: 1/4/2017
Contract Number: MU 5382	Works Order Number: N/A	Delivery Note Number: N/A

## Section 3 DESCRIPTION OF ISSUE

Failure of Performance Indicator PPI S02 Scheme Finish on time

## Section 4 STATE THE ROOT CAUSE OF THE ISSUE

There were two key factors in this failure:

- 1. Our internal local area teams did not follow the correct process which led to local agreements not being fully documented and the correct documentation being received to mitigate why a scheme could not commence on the programmed date, thus having a knock on effect to the finish. This also applied where additional work was requested on site.
- 2. The client local team did not follow process in requesting and providing the correct documentation to demonstrate why a scheme could not commence/complete as programmed and therefore mitigate this PPI.
- 3. Poor contract administration and inaccurate record keeping. (EW/PMI/CE)

#### Section 5 WHAT ACTION IS PLANNEDTO ADDRESS THE ABOVE ROOT CAUSE?

5a CORRECTIVE ACTION (To address the issue)

The following corrective actions have been put in place to ensure this failure does not reoccur:

- The programme is monitored in more detail and a three week look ahead is published on a weekly basis
- The process for dealing with any change to a scheme that will affect either the Start and/or Finish dates has been rolled 2. out again to all teams.
- Any documentation provided as mitigation i.e. EWN, PMI, CE, Emails, is to be stored within the scheme electronic file.
- If an unplanned event occurs meaning that within the lock down period of three months prior to the commencement of the works the start date needs to be moved, then the mitigations and supporting documents have to be sent for approval to the RIS Operations Manager for approval.
- 5b PREVENTIVE ACTION (To prevent recurrence)
  - Administer documents relating to mitigation in the month the scheme date changes
  - Record the schemes effected by a change in the CE document and include the linked programme to show this.
- 5c RESPONSIBILITY CHART REQUIRED (PAGE 2)?

Note: When you have completed this section please send copy to originator.

Section 6 CONFIRM ACTION HAS BEEN IMPLEMENTED (Supply supporting evidence)

Attach copy of 3 week look ahead programme.

Attach copies of the mitigation for the one scheme that has had to change so far.

Action closed by:

Date:



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ISSUE: 5A

Date: August 2011

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**Business Ref:** 

Division and/or Location:

Action Report No:

Date	Prepared:	F	Res	pon	sib	ility	of:	F	) Jepp:	s	
Impr	ovement/Concern		Persons Involved								
Planne Task No	ed Completion Date:		Steve Fox	Richard Whitaker	Contract Man	Local DIC toping	Local Client topes	Suled Hams	Mike Francis	By When	Complete
25	Task Description		Ü.	ă	C	-	_		Œ	B	S
1	Monitor programme and produce three week look ahead	1	x							Ongoing until APR 18	
2	Process rollout for dealing with change to start and/or finish dates			X		×				31/3/2017	Υ
3	Storing of documentation i.e. PMI's EWN's etc.				Х	ī			$\prod$	Ongoing until APR 18	
1	Approval from RIS op's manager			1	Х		1			Ongoing until APR 18	
5	Validate monthly (have any mitigation documents available for the monthly validation meeting)		X	1	ı			Į		Ongoing until APR 18	
		1		1	1		†				
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ote	ONLY ONE PERSON CAN BE RESPONSIB	LE	FO	R A	N A	CT	IVIT				
	(X = RESPONSIBLE, I = INVOLV				,		**!	•			

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ACTION REPORT FORM PROCESS OWNER: Group IMS Manager

Issue: 5A

Date: August 2011

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Section 1

**Business Ref: RIS** 

Division and/or Location: North Yorkshire Action Report No: RAP

Issued by: P Jepps	Issued to:	Date: 1/4/2017
'''	North Yorkshire	
Contract Number: MU 5382	Works Order Number: N/A	Delivery Note Number: N/A

#### Section 3 DESCRIPTION OF ISSUE

Failure to achieve the minimum performance target of 90% for public satisfaction for all schemes only achieving 87.39%

# Section 4 STATE THE ROOT CAUSE OF THE ISSUE

During 2016/17 2804 cards were issued to residents during schemes being on sit. Of those, 582 of the 666 cards returned (30%) recorded a verdict of the works of satisfactory or better

## Section 5 WHAT ACTION IS PLANNEDTO ADDRESS THE ABOVE ROOT CAUSE?

5a CORRECTIVE ACTION (To address the issue)

- 5b PREVENTIVE ACTION (To prevent recurrence)
  - Issue more Customer satisfaction cards
  - Try and promote, during site works, for members of the public to respond formerly
  - . Improve level of satisfaction whilst on site
  - Collate and distribute to the Areas, positive and negative feedback so that standards can be maintained and improved
  - Target problem trends
  - Establish briefings and tool box talks on Customer Satisfaction
- 5c RESPONSIBILITY CHART REQUIRED (PAGE 2)? Y

Note: When you have completed this section please send copy to originator.

Section 6 CONFIRM ACTION HAS BEEN IMPLEMENTED (Supply supporting evidence)

Action closed by: Date:



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Issue: 5A	Date: August	2011	Page 2 of 2					

Business Ref:

Division and/or Location:

**Action Report No:** 

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No	Task Description	Mile		V	W.	Ξ	TS(		By	ပိ
1	Issue more Customer satisfaction cards		X	1					On-going	
2	Try and promote, during site works, for members of the public to respond formerly	1	1	Х	ľ		1		On-going	
3	Improve level of satisfaction whilst on site	1	ī	1	Х		1		On-going	
4	Collate and distribute to the Areas, positive and negative feedback so that standards can be maintained and improved	Ĭ	1	Ï	1	X	ı		On going	
5	Target problem trends			Х	T	1	1		On going	
6	Establish briefings and tool box talks on Customer Satisfaction	1	X	1	1		Г		June 2017	
Note	ONLY ONE PERSON CAN BE RESPONS	SIBLE	FC	R A	AN A	ACT	IVITY	1		
	(X = RESPONSIBLE, I = INVO	DLVE	D)							



PROCESS OWNER: Group **ACTION REPORT FORM** IMS Manager

Issue: 5A

Date: August 2011

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Section 1

**Business Ref: RIS** 

Division and/or Location: North Yorkshire

Action Report No: RAP

Section 2

Issued by: P Jepps	Issued to:	Date: 1/4/2017
	North Yorkshire	
Contract Number: MU 5382	Works Order Number: N/A	Delivery Note Number: N/A

#### Section 3 DESCRIPTION OF ISSUE

Failure of Secondary Performance Indicator RM04 Gully Cleansing

#### Section 4 STATE THE ROOT CAUSE OF THE ISSUE

Failure to clean the gullies to the programme agreed.

- Not achieving outputs due to plant breakdown
- Not following the programme
- Completion of unplanned Gully cleans effecting the programmed works

#### Section 5 WHAT ACTION IS PLANNEDTO ADDRESS THE ABOVE ROOT CAUSE?

5a CORRECTIVE ACTION (To address the issue)

## 5b PREVENTIVE ACTION (To prevent recurrence)

- Review gully running order to ensure it aligns with the new schedule supplied by NYCC
- Review gully cleaning operations to match the new schedule and reduction of resource
- Manage gully cleaning vehicles maintenance schedule and plan downtime into the programme. (MOT, Servicing and tank pressure check)
- Monitor performance and output of each individual team.
- Schedule unplanned gully cleans during weekend shifts

5c	RESPONSIBILITY	CHART	REQUIRED (PAGE 2)?	
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Note: When you have completed this section please send copy to originator.

Section 6 CONFIRM ACTION HAS BEEN IMPLEMENTED (Supply supporting evidence)

Action closed by:

Date:



ACTION REPORT FORM PROCESS OWNER: Group IMS Manager

Issue: 5A Date: August 2011 Page 2 of 2

Business Ref:

Division and/or Location:

**Action Report No:** 

Date Prepared:				Responsibility of: P Jepps											
Improvement/Concern			F	ers	ons Inv										
		nalev	tlinson	ancis	Richard WHitaker			o o							
Planne Task No	ed Completion Date:  Task Description	James Whalev	James Pattinson	Mike Francis	Richard		By When	Complete							
1	Review new Gully schedule and revise running order.	X	I				31-3-2017								
2	Review programme to match the new schedule and include Vehicle down time.	Х	ť				31-3-2017								
3	Log outputs of individual teams		Х				Ongoing until APR 18								
4	Report monthly, actual output verses planned output.		Х				Ongoing until APR 18								
5	Address any shortfalls in production quickly and monitor against CPI targets			х	1		Ongoing until APR 18								
5															
							27								
lote	ONLY ONE PERSON CAN BE RESPONSIE	BLE	FO	R A	N ACTIVI	TY									
	(X = RESPONSIBLE, I = INVOL	VE	))												



ACTION REPORT FORM PROCESS OWNER: Group IMS Manager

Appendix 3d

Issue: 5A Date: August 2011

Section 1

**Business Ref: RIS** 

Division and/or Location: North Yorkshire

Action Report No: RAP

SPI HS01-

17/18

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Section 2

Issued by: P Jepps	Issued to:	Date: 1/4/ 2017
	North Yorkshire	
Contract Number: MU 5382	Works Order Number: N/A	Delivery Note Number: N/A

#### Section 3 DESCRIPTION OF ISSUE

This performance indicator failed to remain below the maximum allowed target of 2.5

#### Section 4 STATE THE ROOT CAUSE OF THE ISSUE

Two incidents occurred during 2016/17 involving members of the public that Ringway could not have reasonably forseen which resulted in the LTIFR exceeding the allowable 2.5 target. These incidents were:

- a member of the public illegal entered a road closure and attacked a member of the workforce resulting in hospital treatment
- a member of the public struck a member of the workforce whilst he was undertaking his duties within a traffic management layout. The driver of the vehicle was found to be under the influence of alcohol.

Section 5 WHAT ACTION IS PLANNEDTO ADDRESS THE ABOVE ROOT CAUSE?

- 5a CORRECTIVE ACTION (To address the issue)
  - Investigate and review all incidents to identify root cause and implement corrective action plans
  - . Use the injured party and workforce colleagues in the investigation to promote 'buy in' to working practices
  - Brief out findings from investigations to promote lessons learned
  - · Address training needs to combat incident types
- 5b PREVENTIVE ACTION (To prevent recurrence)
  - Increase number of safety inspections/audits and tours by all tiers of management
  - Report Monthly on Near Misses and trend analysis of incidents occurring in other Divisions
  - . Monthly reminder when publishing statistics of risks to Health and Safety
  - All incidents and key Near Misses reviewed at Monthly Workforce Health and Safety Meeting
  - Remove, where possible, the workforce from potential points of conflict
- 5c RESPONSIBILITY CHART REQUIRED (PAGE 2)?

Note: When you have completed this section please send copy to originator.

Section 6 CONFIRM ACTION HAS BEEN IMPLEMENTED (Supply supporting evidence)

Action closed by: Date:



ACTION REPORT FORM

PROCESS OWNER: Group
IMS Manager

Appendix 3d
Page 2 of 2

**Business Ref:** 

Division and/or Location:

Action Report No: RAP SPI HS01 – 16/17

Date Prepared: April 2017			Responsibility of: P Jepps											
lmpr	Improvement/Concern			Р	ers	sor								
				cis	Contracts Managers		9	Usellib and O. C.	nd Sarety	haw				
	ed Completion Date:		ebbs	France	ract	o to	for	1	ď	a S	hen	lete		
Task No	Task Description	130	Lui Jepps	Mike Francis	Cont	Agente	Workford	1001	123	Nicola Shaw	By When	Complete		
1	Investigate and review all incidents to identify root cause and implement corrective action plans	X	( )		1	1	ţ	ı			As required			
2	Use the injured party and workforce colleagues in the investigation to promote 'buy in' to working practices		>		1	I	1	1			As required			
3	Brief out findings from investigations to promote lessons learned	1	ı		X	ı		ţ			As required			
1	Address training needs to combat incident types	1	×			ı			1		Review following incident investigations			
5	Prepare, implement and review Health and Safety Strategy	X	ı	1		ı	ı	I			Jan 2018			
	Brief out Annual Safety Briefing to all personnel and selected SCP's	X	1	1		1	1	I			April 2017	Y		
	Remove, where possible, the points of conflict between members of the public and the workforce by use of equipment such as Intellicone, Readibarrier and implementing hard closures	1	I	>	<		1	Ĩ			As assessed			
ote	ONLY ONE PERSON CAN BE RESPONSI	BLE	F	) DR	A	N A	СТ	IVIT	ГΥ					
	(X = RESPONSIBLE, I = INVOL	_VFI	וכ											