

Partnership on Health And Safety in Scotland

Review of PHASS – some issues and options on the way forward

Issue

1. At the December meeting members agreed to initiate a review of PHASS.

Extract from the December minutes

Reviewing PHASS

27. Danny suggested that after five years of PHASS' existence and recent developments including the new HSE strategy and 'Health Works', this was a good opportunity for PHASS to review its work and membership. The HSE Board had encouraged PHASS to produce an action plan to inform its membership and steer its agenda. This approach had worked well when PHASS had contributed to the 2007/08 Scottish Action Plan on Health and Safety.

28. Danny proposed a review of PHASS to include looking at how information is disseminated and views exchanged across the health and safety and business community; look in particular at the health agenda in the light of the new strategy; review PHASS member composition and the possibility of bringing in other organisations; and develop a framework for an action plan.

29. Karen welcomed a review and supported the development of an action plan. She advised that there was a need promote PHASS as an important network and to raise awareness of the initiatives across Scotland that had already been triggered or driven by PHASS, for example, the work on occupational road risk and the road safety strategy.

30. It was agreed to kick off a review in the New Year.

Action: Sarah would produce and circulate a paper to canvass members' views on ideas for new membership and an outline for producing an action plan.

2. This paper is a precursor to the action above. It sets out some of the questions we could consider and some options for taking the review forward. Information in the annexes is intended to be a brief 'look back' to remind members of our origins and evolution:

Annex 1 – terms of reference

Annex 2 – basis for representation and current membership

Annex 3 - role of the steering committee

Annex 4 – arrangements for meetings and secretariat

Annex 5 – reports on PHASS achievements

Annex 6 – current partnerships and projects across Scotland

Annex 7 – the original H&S networking map

Members are now invited to provide a steer on the next steps in the review.

Background

3. PHASS was established in 2005 with the agreement of UK, Scotland Office and Scottish Ministers. Its terms of reference, purpose and scope were as set out in Annex 1. The basis for representation on a steering committee was set out in the report of the February 2005 conference at Annex 2. The role of the steering committee is set out at Annex 3 and the arrangements for meetings and a secretariat are at Annex 4.

Questions for the review

4. The key questions are probably:

- ***What have we achieved?***

Members are invited to consider this in the light of the original remit, roles and responsibilities and also the developments in the context for PHASS' role, such as the Scottish Action Plan on Health and Safety; the debate about devolution; the HSE/SCHWL agreement; HSE's new strategy and Health Works – the new strategy for Healthy Working Lives.

- ***How have we achieved it?***

What are the strengths and weaknesses of the way PHASS operates? What key factors affect our ability to make a difference?

- ***Have we been true to our remit?***

And does that original expression of purpose and intent still have value?

- ***What changes to our membership, remit and arrangements would help us to achieve more?***

Does the remit and/or membership need to change in the light of developments and experience?

- ***Who and how do we want to consult on the future?***

In addition to announcing the review at IOSH 2010 and on the HSE Scotland website - how should we collate PHASS members', and wider, views over the next few months? HSE in Scotland is bidding for funding for a small conference in case we want to relaunch PHASS more publicly after this review.

Some starters for ten:

What have we achieved and how have we achieved it?

5. The strength of PHASS lies in its facilitation of an established network of key interests in health and safety who come together to share information on Scottish developments. This has supported and led to members and member-organisations identifying work that can be done in partnership across organisational and constitutional (reserved and devolved) boundaries. Several developments have sprung from its networking - as described in periodic reports to the HSC (as was) and HSE Board at Annex 5.

6. Some of the work has led to formal projects and agreements such as the HSE/SCHWL clearer working relationship; other projects have been 'task and finish' such as the business-to-business seminars in 2007. A further strength of PHASS has been its continuity and therefore its capacity for sharing knowledge and applying lessons of experience. This is evidenced in the development of the Health Risks at Work project which very much built on earlier work.

Have we been true to our remit?

7. Early discussions about **“better integrated intelligence”** revolved around augmenting high level health and safety statistics with health and community data to produce evidence for targeting action. But we found that the units and currency of information were so different it was difficult to analyse them together. We did not have a research budget to take this forward.

- *If we take “intelligence” in its broadest sense, however, **is there more we could do to collect and collate information and evidence from PHASS and its wider network on health and safety performance gaps in Scotland that we could then seek to address?***

- ***How would we do that? Annually - inviting input?***

8. PHASS has certainly facilitated **“partnership action”** – which really came to the fore during the period when we had a Scottish Action Plan on Health and Safety with a full time co-ordinator based in the Scottish Government. Annex 6 lists a range of partnerships and projects across Scotland’s health and safety community – produced primarily for today’s IOSH exhibition.

9. We have also held joint meetings with Healthy Working Lives National Advocacy and Advisory Group (HWL NAAG) with whom we have a partially overlapping agenda and membership; and HSE and HWL have since formalised an operational partnership agreement.

10. We have also **“co-ordinated and improved communication”** mainly between ourselves but also as public spokespeople. We have perhaps not reached as far into some of our constituencies – particularly private sector businesses and trade unions - as we would have liked.

- ***How can we better use communication channels within each PHASS constituency?***

11. HSE does now have a dedicated eBulletin for Scotland with over 600 members and an event calendar for the whole of the health and safety community – hosted on the HSE Scotland website.

- ***Do we want to go further by setting up an online PHASS community?***

What changes to our membership, remit and arrangements would help us to achieve more?

12. We are an unusual mix of representatives of the economic interests and social partners on the one hand and operational health and safety bodies on the other.

- ***Do we want to move in either direction: either to focus more strategically on influencing attitudinal change in the business and worker communities or more practitioner-based in changing health and safety behaviours on the shop floor?***

13. The HSE strategic themes actually cover both types of influencing:

- Investigations and securing justice
- The need for strong leadership

- Building competence
- Involving the workforce
- Creating healthier, safer workplaces
- Customising support for SMEs
- Taking a wider perspective

• ***Could these help us to focus our agenda and roles for individual members of PHASS?***

• ***What would this mean for inviting fresh faces and new organisations from the wider network (Annex 7) or beyond onto the steering committee who could help deliver practical action?***

14. The remit on its own (Annex 1) remains highly relevant and has taken on added importance since the louder debate on the case for or against extending devolution.

• ***Do we want to make any changes to it?***

• ***Given one view, that added impetus was created during the implementation of the former Scottish Action Plan on Health and Safety, should we develop an action plan perhaps based around the HSE strategic themes?***

15. In 2005, HSE agreed to taken on secretariat responsibilities on the understanding that this would be reviewed after a year. In practice, HSE has continued to manage PHASS, to draft the agenda and to provide a Director's report on HSE's activity in Scotland for each meeting. HSE might not have the resources to continue this indefinitely.

• ***Could we rotate the secretariat and/or receive regular reports and presentations from other members?***

16. Regular attendance at meetings has proved difficult for some PHASS members; there is already consensus that we need to set meetings a year in advance and to agree nominated deputies.

Who else, and how, do we want to consult on the future?

17. The decision to conduct a review has already been publicised on the HSE website and via the eBulletin. The specific questions and this paper could now be publicised and circulated to organisations in the wider health and safety system in Scotland via that eBulletin. The original intention was in any case for this central steering committee to act as the hub of a much wider network and we could take this opportunity to reinvigorate more systematic communication with that broader audience. That process started at IOSH 2010 on 24 and 25 March.

18. At the next meeting on 26th August, a report on any feedback will be presented. Please use this paper to consult within your own constituencies and submit proposals to Sarah Jones in advance of that discussion.

Action

19. Members are now invited to consider the paper, consult their constituencies and provide comments in advance of a full discussion at our next meeting. Comments are also welcome on wider consultation.

Sarah Jones
March 2010

Annex 1

PHASS terms of reference 2005

1. The conference in February followed agreement between the Health and Safety Commission, Scottish and UK Ministers to the establishment of

“A forum which, without infringing the reserved status of health and safety legislation, will give a clear focus for health and safety in Scotland, enhance delivery through better integrated intelligence, and offer a mechanism to co-ordinate partnership action and improve communication in line with HSC/E’s strategy [for the whole health and safety system].”

This established the remit of the Partnership.

2. The purpose of the initiative — as the billing for the conference noted — is: delivering higher standards of workplace health and safety in Scotland. It is proposed that this should be a key message alongside promoting its aim as a partnership across reserved and devolved interests and stakeholders within Scotland’s health and safety system.

3. In more detail it was envisaged that such a forum would:

- Examine how the HSC strategy for the health and safety system can be best applied in Scotland.
- Co-ordinate both reserved and devolved powers to most effectively tackle health and safety issues.
- Gather and review information and establish evidence on Scottish accidents and ill health patterns at work. Place this in the context of the wider accident and ill health picture. Agree evidence where possible; establish areas of disagreement, and how these can be resolved. Do the same for enforcement statistics.
- Ensure that action on the strategy in Scotland takes in to account the priorities for Scotland established by the review of the evidence.

These are the objectives for the Partnership.

4. The scope of the Partnership's work was considered at an early stage. HSE took the view that initially the Committee should cover “mainstream” health and safety sectors to manage the number of key stakeholders, and to increase the likelihood of making early progress. Discussion at the conference did however suggest that lessons could be learned from, and best practice shared with, those industries where a licensing or safety case regime applies — for example offshore installations, onshore petro-chemicals and railways. It is recognised that these industries have a high profile in Scotland, and that there are already sectoral health and safety initiatives with which the Partnership could make contact and establish closer links over time.

The committee could therefore agree at this stage to establish links with other sector-specific initiatives.

Annex 2

A central steering committee, chaired by Health and Safety Commissioner, Margaret Burns should meet at least three times a year and involve representatives of constituencies on the basis of:

- two private sector employer bodies;
- the STUC;
- a private sector trade union;
- a public sector employer;
- a public sector trade union;
- two regulatory bodies: one LA and one HSE;
- the Scottish Executive;
- Healthy Working Lives;
- one from a health and safety/health professional organisation.

Members should be appointed every three years, for approval by HSC. Representation may however be flexible allowing for deputising when necessary.

Current membership as at March 2010

Danny Carrigan	PHASS Chair (HSE Board member)
Steve Bell	SCHWL, Director
Carol Boyd	South Ayrshire Council
Roddy Duncan	Scottish Government - Public Health and Well-being Division
David Evans	Society of Chief Officers of Environmental Health
Harry Frew	STUC and UCATT
Russel Griggs	CBI Scotland
James Hynd	Scottish Government, Corporate Facilities Management
Kathy Jenkins	Scottish Hazards Campaign
Karen McDonnell	POOSH Scotland
Stephen Merchant	Health and Safety in Voluntary Sector Scotland
Sarah Jones	HSE, Director's Office, Scotland
Rory Mackail	Federation of Small Businesses
Fiona Smith	STUC & UNISON
Paul Stollard,	HSE Director, Scotland
Ian Tasker	STUC Assistant Secretary

Annex 3

The role of the Steering Committee in 2005

Against this background, there was a fair degree of consensus in workshop discussions at the conference that the central steering committee should collectively:

- decide a programme of priorities for action based on the available evidence
- receive reports on the evidence including where further research is needed to address gaps in knowledge
- influence people and relevant bodies to contribute expertise and resources including funding
- innovate approaches for implementing and managing action on priorities
- manage the relationship and joint working with the Scottish Centre for Healthy Working Lives
- report to Ministers through HSC on action taken and its impact

Individual steering committee members' role therefore could be to:

- engage the broadest range of people and organisations with their constituency in the work of the Partnership
- consult and communicate with their constituency interest via existing networks and structures, creating new ones where necessary
- act as a spokesperson and champion for Partnership
- propose and develop ideas and issues for action supported by evidence

Annex 4

Meetings and secretariat - as agreed in 2005

Meetings of the full steering committee will take place at least three times a year, as availability allows in February, June and November and will usually last half a day. The committee may agree however to make one of these meetings a full day on a residential basis.

Meetings will normally be closed but the committee might want to consider advertising and holding an open meeting from time to time.

Correspondence from the secretariat will always be conducted by e-mail. This may include seeking views on matters of policy and decision-making that does not require a face-to-face discussion.

All papers and minutes will be open and published on the HSE website unless the committee agrees otherwise.

For the first year at least, the secretariat will be provided by the HSE Director's Office, Scotland. In due course, this will be reviewed to assess the benefits of sharing the function with other participating organisations.

Annex 5

Specific achievements as reported to HSC and the Board

Report to HSC in March 2007

[PHASS] Successes have been achieved in the following areas:

- improving understanding of HSC's strategy and what it means for Scotland - considering the evidence and underlying factors for health and safety performance in Scotland alongside public health data;
- Partnership members' support as spokespeople in HSE's, and other partners', campaigns;
- mapping the health and safety system in Scotland (Annex 1A);
- helping to unify and strengthen participation by professional OHS bodies via a representational group - POOSH Scotland;
- commissioning POOSH Scotland to produce a directory of OHS bodies and their resources with a view to improving access to competent advice, building capacity, and developing scarce disciplines;
- commissioning a pilot good neighbour study between business and colleges facilitated by the CBI;
- taking evidence from Community, the union, on the risk of violence in betting shops and seeking Local Authorities' support via the Health and Safety Co-ordinating Group of environmental health officers in Scotland;
- strengthening links with RoSPA Scotland and companies who have signed up to its Higher Performers' Challenge;
- learning from large Local Authority employers' approach to managing health and safety, including worker and elected member involvement, and from representatives who are also on the HSE-chaired LA Forum;
- working on ways of linking good health and safety management with economic success in the "Smart, Successful Scotland" strategy;
- thinking through the better regulation agenda in the Scottish context;
- promoting worker involvement on the basis of the STUC's model for delivery of a Workers' Safety Advisers' Challenge Fund project;
- speaking at key events to promote the Partnership, the sensible risk debate, and the importance of safety and improving health to Scotland's success;
- advising the Scottish Executive and Ministers on the content of a draft Scottish Action Plan for Health and Safety.

At the end of last year (2006), the Partnership could be said to have come of age when it became clear that it was the ideal collaborative body to help develop and support an initiative by the Scottish Justice Department. This arose from a commitment by the Justice Minister to develop non-legislative health and safety initiatives in Scotland in the wake of the decision to introduce a new offence of corporate homicide via a Westminster Bill instead of in the Scottish Parliament. Scottish Ministers are therefore keen to see what additional measures they might support in Scotland — particularly to help reduce workrelated deaths, and a draft Action Plan for Health and Safety is being developed by the Scottish Executive.

Report to HSE Executive Board in September 2009

PHASS's remit is to advise on delivering HSE's strategy in the context of Scotland's economy, industrial makeup and culture, and effectively manage the overlapping

interests of reserved and devolved governments. PHASS was mentioned in Calman's assessment of the current arrangements for managing devolved and reserved overlapping interests. It is not a policy-making body, but could play a useful role in discussions on the development of a Scottish plan.

Current projects initiated with PHASS support include:

- An EU funded risk management campaign in the voluntary homecare sector delivered by Healthy Working Lives and the STUC;
- "Health Risks at Work – Do You Know Yours?", a DVD and toolkit for SMEs to improve management of common work-related health risks which has been developed by HSE for delivery by SCOS, RoSPA, SCHWL etc, and will be launched in September;
- A strategy delivery initiative for HSE by RoSPA to develop practical support for worker involvement in non-unionised workplaces; and
- A series of joint meetings with the National Advisory and Advocacy Group of the SCHWL to help reduce overlaps and more closely align the respective organisations.

One of the strengths of PHASS is its tri-partite makeup with employers (CBI), small businesses (FSB) and trade union (STUC) representation. In addition to PHASS, regular dialogue with the STUC and member unions occurs through a variety of industry specific forums. There is also regular participation in events ranging from the STUC conference to individual worker representative training events run by particular unions.

Annex 6 - Scottish partnerships & projects

Roles and responsibilities	Key organisation	Partners	Purpose and projects
Support and advisory services	Scottish Centre for Healthy Working Lives (SCHWL)	STUC (Scottish Trade Union Congress)	Improving worker involvement
		Scottish Hazards Campaign	Joint promotion and educational events
		POOSH (professional organisations in OHS)	Improving access to competent support
		Health & Safety Executive (HSE)	Operational partnership agreements
		Local authorities	Operational partnership agreements
		HaSIVSS (voluntary sector)	Joint promotion and educational events
		Royal Society for the Prevention of Accidents (RoSPA)	Health Risks at Work – Do You Know Yours? Scottish Occupational Road Safety Alliance (ScORSA)
		Universities	Collaboration on OHS training, competences & guidance
		SCOS (Scottish Chamber of Safety)	Health Risks at Work – Do You Know Yours? Event support
		Scottish Fire and Rescue Services	Fire risk assessment publications; DVD and training
		CIPD	Sickness Absence management
		IOSH	Publications, training, professional development
		CHASTE (education sector)	Promotion of joint working in education
		NHS Scotland	Service delivery; GP fit note; fit for work
		Scottish Government	Publications, projects and national policy agenda; GP fit note
	Business community	Mentoring, piloting, services, awards	
	RoSPA in Scotland	RoSPA Scottish Higher Performers Forum	Mentoring, piloting, services, awards
		SCHWL	Scottish Occupational Road Safety Alliance (ScORSA)
		SCOS	Health Risks at Work – Do You Know Yours?
		HSE	Developing a worker involvement toolkit
Health and Safety Lawyers Association	SCHWL	Working with the H&S community to raise awareness of legal pitfalls and compliance issues	
	Scottish Government		
The regulators	HSE	Local authorities	Regulatory partners: delivering HSE strategy in Scotland
		Partnership on Health and Safety in Scotland (PHASS) For full PHASS membership see http://www.hse.gov.uk/scotland/committee.htm	Implementing HSE strategy in Scottish context; H&S community events website; overview of all partnerships
		SCHWL	Operational partnership agreement
		RoSPA	Developing a worker involvement toolkit with HSE
	Local Authorities	HSE	Regulatory partners: delivering HSE strategy
		SCHWL	Operational partnership agreements; sector specific projects (fire, noise, skin); support & training
	SEARS (Scotland's environmental and rural services)	For SEARS partners, see: http://www.sears.scotland.gov.uk/	'One door any door' principle – to provide easy access to information and advice from SEARS partners.
		HSE is an associate partner	SEARS partners taking part in HSE safety and health

Practical support networks	Scottish Chamber of Safety (SCOS) & Local safety Groups	HSE	awareness days (SHADs); HSE material placed in rural hubs Delivering campaign events (through HSE agreement with Safety Groups UK)
		SCHWL } RoSPA }	Health Risks at Work – Do You Know Yours?
Professional organisations	POOSH Scotland (professional organisations in occupational safety and health)	For full POOSH Scotland membership see: http://www.hse.gov.uk/scotland/poosh.htm	Facilitating access to the services of professional bodies; free regional meetings and events to publicise and share good OSH practices; publications on good professional practices and operating standards;
		PHASS	Collective voice and representation (eg responding to consultations); mapping and improving access to competent advice and training
Workers' representation and networks	STUC	SCHWL } HSE }	Promotional and educational events for eg the voluntary and education sectors Promoting worker involvement EU campaign events
	Scottish Hazards	SCHWL	Promotional and educational events
Academic institutions	Strathclyde University	SCHWL	Developing training and competences
	Glasgow University	SCHWL	Sickness absence management (SAM) tool and training; GP fit note and fit for work
		HSE	Healthy working lives research & evaluation Case studies on best practice; building the case for workplace health, safety and well-being
Sector-specific networks	Site Safe Scotland (construction)	HSE	Employers, workers & trade associations collaboration; promoting competencies; delivering SHADs and Working Well Together in Scotland
	HaSIVSS (health and safety in voluntary sector Scotland)	SCHWL }	EU risk assessment campaign events Promoting competence and worker involvement
		STUC }	
		HSE }	
	CHASTE	SCHWL }	Supporting the education sector with projects, advice and networks
		HSE }	
Education centres }			
Occupational health & safety services	OHSAS (Occupational health & safety advisory services)	SCHWL	Developing new GP fit note guidance and fit for work services (Working Health Services Scotland)
		Scottish Government	
	SALUS	HSE	Return to work support
		SCHWL	Fit for work services (Working Health Services Scotland)
	Scottish and UK Governments	Developed the SCHWL Advice line	

Annex 7

Health and safety networks in Scotland

