Reducing Risks, Protecting People: HSE’s Decision Making Process

Issue

1. The aim of this paper is to familiarise members with *Reducing Risks, Protecting People* (R2P2), the Health and Safety Executive’s (HSE) decision-making process. Members are asked to take account of this framework when they are asked to formulate proposals or make decisions.

Background

2. In recent years, there have been moves, co-ordinated through ILGRA (the Inter-departmental Liaison Group on Risk Assessment), to encourage British Government Departments to publish “risk frameworks”. These frameworks describe each Department’s decision-making processes on risk issues. HSE’s framework is called *Reducing Risks, Protecting People* and explains the basis for HSE’s decisions regarding the degree and form of control of risk from occupational hazards. Published in December 2001, it is available free electronically at [http://www.hse.gov.uk/risk/theory/r2p2.pdf](http://www.hse.gov.uk/risk/theory/r2p2.pdf) and in hard copy (ISBN 0-7176-2151-0, price £5.00).

3. It follows the Better Regulation Task Force’s five principles of good regulation:
   - Openness and transparency;
   - Accountability;
   - Proportionality;
   - Consistency; and
   - Targeting.

   Its central purpose is to describe the process and underlying principles through which HSE (on behalf of Health and Safety Commission) reaches decisions on risk control measures. This gives HSE staff guidance and ensures consistency, and opens up our decision-making process to others.

4. Transparency is vital to ensure HSC/E’s effectiveness, to reassure the public that risks are being properly addressed and to let other regulators know the basis of decisions so as to promote consistency. It also means that HSC/E can be held accountable for their decisions, since people can look at the document and see whether they have followed their espoused framework.
Argument

What does R2P2 contain?

5 R2P2 has three main sections. Firstly, it describes its purpose. Secondly, it reviews developments in knowledge about risk and risk management issues since the introduction of the Health and Safety at Work etc Act 1974. In particular, it discusses:

- the public's perception of risk and what is meant by individual concerns (tangible harm to individuals) and societal concerns (socio-political response to dread risks, unfamiliar risks, risks that if realised produce large numbers of victims and risks that affect particularly vulnerable groups);
- changes in the regulatory environment (internationalisation, complexity, legal judgements about the meaning of “risk”);
- changes in business; and
- changes in society’s preferences, values and expectations.

Thirdly, it describes HSC/E’s framework for adopting decisions. This is a 6 stage, iterative process, in which stakeholders are actively involved at each stage. The stages are:

1. Deciding whether the issue is one for HSC/E;
2. Defining and characterising the issue;
3. Examining the options available for addressing the issue, and their merits;
4. Adopting a particular course of action for addressing the issue;
5. Implementing the decisions;
6. Evaluating the effectiveness of actions taken and revisiting the decisions if necessary.

6 Getting stage 4 (how we reach decisions) right is particularly important. R2P2 says that a large part of getting it right is making sure that we understand the criteria for judging whether a risk is unacceptable, tolerable or broadly acceptable. The “tolerability of risk” framework, originally discussed in a 1988 HSE publication The tolerability of risk from nuclear power stations is described (see Annex 1). However, R2P2 is not relevant only to high hazard industries or to what are traditionally regarded as “safety” risks. R2P2 is intended to apply across the full range of risks with which HSC/E are concerned.

Why should R2P2 concern Advisory Committees?

7 When R2P2 was published in December 2001, HSE’s Director General issued a message to all staff, asking them to ensure that the framework was followed in our work. At the very simplest level, therefore, advisory committees will wish to know about R2P2 so as to know what to expect from HSE staff who are developing proposals for HSC.

8 However, there is a more substantive reason as well. R2P2 seeks to secure consistency in HSC/E’s decision making. (HSC/E are clear that they do not seek uniformity: R2P2 is a framework, not an entirely rigid set of instructions.) There is a clear expectation that the processes described will be followed unless there are
compelling reasons to depart from them. Where there are departures, HSC/E will need to be clear why they are necessary, and to be prepared to defend them. Therefore, *where advisory committees formulate their own proposals independently of HSE, they are encouraged to use the R2P2 framework for their decision-making.* Members will need to have some familiarity with R2P2 and the concepts it describes to use it effectively. HSE staff will help the Committee do this.

**Action**

9 The Committee is invited to:

- note the contents of this paper; and
- Contact Stuart Bristow, HSE, CoSAS RPU, 8 South, Rose Court, Tel: 020 7717 6962, (stuart.bristow@hse.gsi.gov.uk) if further information or clarification is required on R2P2.
The tolerability of risk framework

- Unacceptable region
- Tolerability Region
- Broadly acceptable region

HSC/E's tolerability of risk framework