

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

LIFE AFTER LASP: EMBEDDING THE PARTNERSHIP AS “THE WAY WE DO BUSINESS”

Introduction by the Head of the Partnership Programme

This is the Local Authority Unit’s plan to March 2008. It sets out how we will build on the success of the LA Strategic Enabling Programme (LASP): to develop the partnership between HSE and LAs as enforcing authorities, and help deliver HSC’s strategy for health and safety in GB.

Although this plan deals largely with LAU’s work, success depends on many other players – as “partnership” implies. The plan is therefore set in the broader context of partnership development, and will I hope be of interest to that wider community. In outline, the objectives are:

- shift the focus of partnership work (from establishing the infrastructure, which was LASP’s objective) to field-based delivery – making partnership the way we do our business;
- to give effect to the conclusions of the HSE “Fundamental Review”, in particular to develop a set of outcome-focused success criteria;
- to take account of and contribute our experiences to development of the “better regulation” agenda; and
- to strengthen the outward-facing elements of the partnership towards LAs’ other priorities, the business community, workers, and other government departments.

There are in my view four principal risks to achieving success. First is continuing to communicate within a complex set of relationships so as to raise the profile of the partnership and ultimately of H&S within LAs; second is gathering convincing evidence to demonstrate that the partnership is delivering cost-effective outcomes; third is maintaining the necessary level of “seeding” resources and input from HSE and LACoRS so that in due course the partnership becomes self-sustaining; and fourth is the potential disruption from work to establish LBRO – now on a tighter timescale.

It is however also true that there are many opportunities ahead. We have come a long way in the past three years. I still believe that there is a great prize to be won from partnership, but that it will be a long haul. I hope that by March 2008 we will be able to show continued good progress, and that the investment by both HSE and LAs is paying off with improved health and safety outcomes.

Phil Scott
January 2007

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

LA/HSE PARTNERSHIP PLAN: JANUARY 2007 TO MARCH 2008

1.0 Introduction

1.1 This plan aims to build on the successful conclusion of the strategic enabling programme (LASP) by setting out the next stage in developing and embedding the partnership. A full evaluation of the work undertaken by LASP is still in progress but it is clear that the objectives originally set out in the Statement of Intent have been substantially met (a conclusion endorsed by HSC in February 2006). However developments in Government, notably the Hampton report, have had and will continue to have an influence on the final direction of the partnership.

1.2 A full review of progress with the partnership, and proposals for future work, was commissioned by HSE's two DCEs in February 2006. This segued into the HSE Fundamental Review in April, which examined the developing partnership as part of the theme "working with others". In June HSE's Board concluded that the arguments in favour of the partnership remained strong, and that all concerned should work towards making the partnership "the way we do business". There was however a need to be clearer about what success would look like, and how and when this would be judged.

2.0 LASP's origin

2.1 The LA strategic programme was initiated in autumn 2003 and launched in February 2004 as part of HSC's 'Strategy for workplace health and safety in Great Britain to 2010 and beyond'. A key theme of the strategy is working in partnership. Following earlier consultation about the role of LAs as enforcing authorities, the strategy made clear the intention to create a new relationship – a partnership – between local authorities and HSE.

2.2 The drivers behind this intention were the need to get the best value from LAs' and HSE's joint resources, a focus on joined-up government and a need to ensure more consistent enforcement across enforcing authorities. The detailed story of LASP is set out in the programme review. The most valuable reflection on LASP is probably the matter of the lessons which have been learned, and how they will be applied in the next phase of partnership development. These are summarised at Annex 2.

2.3 One obvious but key fact to be remembered is that HSE and LAs are different: HSE is a national regulator with a focus on H&S; LAs are complex, multi-purpose and democratically accountable bodies. An inherent consequence is that, even as the partnership strengthens, HSE and LAs will not always agree on priorities, allocation of resources or the correct course of action in every instance. Such disagreements should not be regarded as detrimental to the partnership; indeed, recognising our different perspectives helps prove how far we have come.

3.0 Onwards and upwards.....

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

3.1 Delivering impact through the partnership means greater joining up of front line resources – but it is clear that the range of roles and contributors within HSE and LAs to secure success is very wide: for local government the key players include LACoRS, its Policy Forum (an officer advisory body) the LGAs and individual LAs; LA elected members; senior officials; EH practitioners; county liaison groups; and for HSC/E they include senior officials; Fit3 programme staff; CoSAS; HSL; CDS; sector and policy staff; FOD HoDs; partnership teams; Heads of Operations; and individual field staff. At the centre LAU aims to catalyse these many contributors.

3.2 The plan to move the partnership forward must take the challenge of communications with these key players into account – it is important that all of these contributors/teams understand their role in delivering the partnership. This plan sets out the workstreams which continue to support and develop the partnership, driven largely by LAU (in conjunction with LACoRS and some key policy staff such as CACTUS and the enforcement programme), and the field partnership teams (see summary of their role at Annex 1). Partnership teams have been central to building and maintaining the relationship with local authorities, including the development of joint enforcement plans. The inclusion of local authority secondees in the partnership teams has had a considerable beneficial effect in building trust and confidence with LA colleagues. LAU will continue to play a lead role in giving direction and support to the regional partnership teams in their role of local partnership management.

3.3 Another feature of the programme has been the creation of both national and regional governance arrangements that will need continuing support, and efforts to ensure a voice for local government in policy and programme work. Centrally the redeveloped HELA, with a new membership, clear terms of reference and support from LACoRS is able to guide and support work across HSE and LAs. LAU will also need to support the newly formed Local Government Panel, comprising elected members nominated by the LA Associations, which meets with the Commission twice a year.

3.4 Cross governmental activity: the Commission and Executive will rely upon the support of LAU, within HSE, in LA enforcement matters and as a reference source in supporting responses to official correspondence – though in practice, and in the spirit of partnership, colleagues in LACoRS provide the essential LG perspective. LAU will continue its cross-government role, in support of policy colleagues, in representing HSE interests, as the post-Hampton agenda and infrastructure becomes established, and as the LG White Paper proposals are developed and come into effect.

3.5 The ultimate objective of the partnership – the delivery of efficient, effective, consistent (etc) regulation by HSE and LAs, in delivering the Commission's priorities – is in practice planned by a mixture of the Fit3 programmes, joint planning groups in the field, and LA and HSE practitioners. The governance arrangements for the partnership recognise the importance of the LA contribution to policy and programme development as well as

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

delivery. This plan is designed to help LAU facilitate the partnership's development in a post-LASP environment.

4.0 Objectives for the next 15 months (detail in Annex 3)

4.1 The next step is to continue to develop the detailed workstreams for the partnership programme through to March 2008, and deliver the related products and processes that achieve the following objectives:

1. **to maintain, service and continue to develop the infrastructure built during LASP, including support for LAs.** LAU will continue to promote and develop appropriate and relevant training, guidance and support for LAs in conjunction with the central policy teams and with regional partnership teams;
2. **to shift the focus (from infrastructure development for the partnership) to field-based delivery;**
3. **to strengthen the links to business, to LAs' wider objectives, and to relevant government departments;**
4. **to raise the profile of H&S within LG, against a common (with HSE) performance standard, and exploring the potential for including H&S objectives within the LAA.** Establishing performance indicators in line with the s.18 draft guidance and a recast vision in light of the outcomes of the programme workstreams and taking account of post-Hampton work;
5. **to maintain a strong emphasis on communications, in particular to address the "hearts and minds" challenges that remain inside HSE;**
6. **to develop (a) a set of outcome-focused success criteria for the partnership, to enable a view to be taken at an appropriate time of the balance of costs and benefits; and (b) a proportionate process for gathering outcome information from partnership work, in order to inform the cost/benefit judgement;**
7. **to deliver those elements of LASP which have become dependent on progress with the Better Regulation agenda and therefore remain outstanding following the conclusion of LASP and in doing so, to take an active role in relevant BR initiatives, promoting our experiences as an exemplar of good central/LG relationships;**
8. **to give effect to the decisions of the HSE "Fundamental Review", which concluded that the LA/HSE partnership was a vital contributor to HSC's strategic delivery framework, and should be sustained and developed to become "the way we do business".**

5.0 Governance

5.1 Delivery of the plan will be overseen by a Partnership Management Group. It met for the first time in October 2006. As SCS "champion" for the Partnership Programme, Phil Scott is accountable for delivery of the plan to

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

Justin McCracken. The wider partnership is subject to various levels of strategic governance, principally HELA and the LGP/HSC meetings (both of which have their own ToRs, settled during the governance workstream in LASP).

6.0 Risks and pressures

6.1 LAU maintains a risk log for the programme, subject to review by PMG. The principal risks are as follows.

The health of the relationship

6.2 It has been helpful that the Fundamental Review has broadly endorsed the objectives and direction of the partnership. This has brought a focus for the work of the partnership teams to deliver the wish of the HSE Board that partnership working becomes “the way we do business”. But the success of LASP as an enabling programme needs to be seen in a realistic light. The relationship had been allowed to deteriorate over many years and trust levels between both central and local services remain fragile. There are a number of sceptics in Local Government and HSE at various management levels who may capitalise on any obvious weakness in supporting the partnership.

6.3 LAU is at the centre of the need to continue to grease the mechanics of the partnership and ensure it is not only maintained, but also developed towards self-sustainability. Though the partnership will probably always need a central focus, and will always have areas of sensitivity that will need careful handling, and good communications, it will need particular nurture in the next few years. LAU is being re-structured to enable it to be more strategic, working alongside the regional partnership teams.

External pressures

6.4 The Better Regulation agenda presents a clear pressure on the work of the programme and represents both threats and opportunities for the future. The Local Better Regulation Office (LBRO), being created as a direct result of the Hampton recommendations, has a focus upon Environmental Health and Trading Standards regulatory responsibilities. The current Rogers review, aimed at rationalising LA regulatory priorities, represents a threat to the position of H&S issues and their resourcing. Further, the Retail Enforcement Pilot is looking to create a regulatory regime across these and other boundaries. The key areas of concern are around reducing burdens on business and consequently reviewing issues of consistency of enforcement, priorities and performance. The areas that concern the LBRO are also the issues at the heart of the health and safety partnership structures created across the country. Therefore as the LBRO develops its portfolio of work, it will inevitably ‘cross’ many of the workstreams developed within the partnership programme. It remains essential that work on the partnership is well informed by, and seeks to influence, the overall better regulation agenda.

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

6.5 There is much other activity on the LG front which we need to keep up with: continuing restructuring in response to Lyons; the LG White paper and in particular the approach to LAs performance taken within the reformed inspection regime; the role of LAAs as a key driver of priorities and their resourcing; overall such that the LG environment is likely to look very different in 2008 from the position when LASP was conceived.

Communications and sensitivities

6.6 It is important to ensure that communication and understanding within HSE is effective. Mis-information and wrong messages to LA colleagues could easily undermine the fragile relationship. Financial pressures and prioritisation may well lead people to believe that partnership working is additional work and not a priority, set against traditional approaches. It is also important that HSE staff understand the relationship between HSE and LAs and don't see it as a ready and directable resource that will ease pressures on HSE. There is some distance to go in matching LA practitioners' enthusiasm for the partnership and Fit3 with similarly positive attitudes across all parts of HSE. This is as much a question of culture as of better communications – we see a major push is needed to ensure that all HSE contributors and potential beneficiaries of the partnership are supportive and “on message”.

6.7 LAs, like HSE, are constantly juggling competing pressures. In the case of regulatory services, Environmental Health departments are being driven by the Food Standards Agency (FSA), DeFRA, Department of Health (DoH) (smoking agenda), and many others. This results in demand on ever diminishing resources, clearly evidenced by the particular pressure from the FSA, which has been one of the main reasons for the historical drift of resources away from health and safety.

6.8 National EH issues eg avian flu, licensing, smoking and other public safety matters occurring from time to time will always be a priority for LAs. It will be important to ensure that HSE keeps abreast of public safety concerns in planning future joint working with LAs.

Resources

6.9 The HSE budget for 2006/07 and 2007/08 is under considerable pressure and in common with others LAU will need to make significant savings over the next 18 months. The structure originally conceived for LAU in the LASP review has had to be re-visited in light of reduced finances. In essence the overall budget for LAU has been reduced by around 40% taken as a whole. The consequence is a reduction in programme money and in payroll. The decision has been taken to protect funding for the regional partnership teams in 2007/08 but to reduce the structure of LAU to 14 posts, which includes an inward secondee from a local authority. The Unit will be substantially based in Bootle but will have a London presence. These financial pressures mean that resources will not be available to support LAs at the level originally expected. This will have to be carefully managed across the organisation as expectations have been built in LA circles; the programme

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

will need to be even more innovative to help fill the gaps. The area most significantly affected by this funding shortage is likely to be the provision of training for LAs.

6.10 Resourcing issues also encompass the continuing pressures on LA EH departments, and the need for partnership players to press for a higher profile for H&S within overall LA budgets. The current Better Regulation debate on setting fewer priorities for LAs may present a considerable challenge to maintaining the modest increase in overall LA resources on H&S over the past couple of years. And smaller authorities in particular frequently find it very difficult to find the resources to play their part in the additional demands of joint project planning, regional governance, and the like.

Delivering results

6.11 The partnership is essentially “on trial” during the current work year – the first which has systematically planned for partnership activities in the field. We know that it is difficult to access consistent information about LA activities and successes – both qualitative and quantitative. It has been made clear to LAs and partnership teams that it will be essential for a majority of LAs to provide good quality information to demonstrate the value of front-line work during 2006-07. Some quantitative information is vital – eg about the use of resources, and about enforcement, but – with the agreement of the PMG – LAs have each been challenged also to produce two “stories” about their Fit3 work: short accounts of activities and outcomes. These should provide the Fit3 teams with a rich source of feedback.

6.12 The HELA Extranet is a product of the work of the programme but is still in its early development stages. It is hoped that ultimately the Extranet will become the main vehicle for sharing data, on a real time basis and for capturing and disseminating good and/or best practice. It is also the mechanism that will be used to collect performance management information from local authorities and thereby contribute to the publication of national statistics and progress towards the Commission’s priorities. LAU will work closely with both Communications Directorate and COSAS, Statistics unit to ensure consistency with the wider work of HSE.

6.13 The development of the partnership performance framework (and the s.18 guidance on which it is based) is a priority workstream within the plan, though it remains subject to the vagaries of LBRO’s establishment.

7.0 Milestones

7.1 The main milestones are clearly the points at which it is possible to look back and judge the effectiveness of the partnership during the work years 2006-07 and 2007-08, that is, in summer 2007 and summer 2008. At the latter point we will also need to assess the success of the partnership overall, against the criteria being developed.

PAPER H3/06

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

7.2 A detailed project plan based on Annex 3 is under development to set out the timescales for achievement of important milestones. Progress with the specific and detailed work set out in that plan will be reported quarterly to the PMG and Justin McCracken.

February 2007

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

ANNEX 1: ROLES OF FIELD PARTNERSHIP TEAMS

Partnership Teams embody the Health & Safety Commission vision of HSE and LAs working together to deliver HSC strategies.

In short.....

The PM role is a proactive one, acting as a catalyst in promoting, externally and internally, regional and local partnership, and building relationships of trust and goodwill. We work closely with LAU and LACoRS as part of the wider team sustaining and developing the partnership, and helping deliver the HSC vision of partnership as 'the way we do business'. We provide support to LAs, working with our liaison groups (and others) in promoting Fit3 and encouraging LAs to develop their H&S workplans around the Fit3 portfolio. We look to FOD colleagues in particular to make a reality of the partnership in our front-line work.

What does a partnership team do?

- Facilitate liaison groups as a forum for partnership
- Facilitate communication in both directions between HSE and LAs
- Educate and inform HSE colleagues as to the benefits of partnership
- Seek, coordinate and encourage delivery commitments to Fit3 from LAs
- Work with FOD managers to coordinate FOD and LA delivery of Fit3
- Seek out, organise and communicate information about LA achievements
- Promote and support governance arrangements appropriate to delivering HSC strategy in the regions
- Support LA managers and Elected Members with information about HSC priorities and the reasons for them
- Support development of national strategies e.g. buddy to Programme teams
- Engage and influence other strategic delivery bodies in the regions e.g. Crime and Disorder Partnerships, Local Strategic Partnerships
- Provide proactive and reactive advice and guidance to LAs
- Support Partners in working through uncertainty
- Support LAs in delivery of the HSC Enforcement Policy through facilitating benchmarking, peer review etc
- Provide support in terms of EHP competence, helping develop, coordinate and, where appropriate, deliver training that aids delivery of LA commitments
- Encourage experimentation and initiatives which are consistent with breaking down barriers, such as joint warranting
- Help identify opportunities where joint working has the potential to deliver more than the sum of the separate approaches

What partnership teams can't do

- Dictate how LA managers or Elected Members choose to allocate or prioritise resources
- Force deadlines or commitments out of LAs, especially if there is short notice or requests come out of line with LAs own planning cycles
- Oversee, audit, police or manage LAs workplan delivery
- Bar LAs from doing non Fit3 work if they perceive over-riding local priorities
- Dictate to FOD managers how they deliver their operating plans

What partnership teams need from you

PAPER H3/06

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

- an appreciation of the role of the partnership in HSC/HSE's business and support for it
- information from programme teams which is timely and co-ordinated
- active help to develop HSE's capability to be a good partner, both positively but also by avoiding common pitfalls, viz:
 - understand the nature of the partnership and LAs' role in policy and programme design as well as delivery
 - actively maintain good working relationships with LA colleagues with whom you have contact
 - recognise the wider benefits to HSC/E and H&S of providing support.
 - recognise that LAs have pressures on them other than Fit3
 - recognise that partnership is a two-way process, and that HSE and FOD need to show where it will support LAs' local priorities as well as HSC's
 - eschew patronising behaviour and injudicious use of language
 - remember that good communications is at the heart of one HSE relating to and working with 410 LAs!

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

ANNEX 2: LESSONS LEARNED FROM LASP

- the value of inward EHO secondments (knowledge, trust etc)
- Good (open, honest) working relationship with LACORS
- keeping the pressure on - the dangers of key messages being ignored, forgotten etc (hearts & minds)
- support & visibility from top eg HSC Chair, Joyce/Sandy, Chief Exec etc, Conference
- importance of aligning cycles between LAs & HSE - getting messages/info across at right time, early enough eg Fit3
- acknowledge different perspective of LAs - we can't dictate terms
- importance of choosing the right measures & reaching agreement on what to measure & when
- key people in key posts driving forward
- importance of effective comms & ability/willingness of those providing the "products"
- high visibility of LAU at LA meetings/events
- recognising the differences with devolved administrations
- difficulty of changing systems in HSE to align with LAs and vice versa
- sensitivities around competencies of LA officers.

PAPER H3/06

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

ANNEX 3: WORKSTREAMS

Planning objective: to specify the detailed workstreams for the partnership programme through to March 2008, and deliver the related products and processes.	
Product/Process	Progress/comments
<u>P1:- Updating LAU/partnership plan and risk and issues register.</u>	Final version of plan agreed Feb '07 and partnership risk register linked to AD's partnership report and plan prepared for Partnership management committee December 06 meeting.
Objective 1 to maintain, service and continue to develop the infrastructure built during LASP, including support for LAs	
<u>1.1 Flexible warranting:</u> Support to new and existing pilots	Pilot development and support provided by Partnership Teams
Develop system for national adoption of flexible warrants including infrastructure development and wider rollout	Progress reported to HELA 11/10/06 who agreed to set up Task and Finish Group which has now met several times. Initial April deadlines may be problematic
Ongoing support of flexible warrants	Workload will depend on final outcomes from Task and Finish Group
Impact upon EA Regs and need for their review/revision	Position paper prepared. Await outcome of Flexible Warrants Task and Finish Group
<u>1.2 Training, competence and guidance:</u> Delivering greater access to training/delivering SITNA outcomes	Includes agreeing new training and changes to EH training and degree courses, CPD arrangements & Conferences, defining LA/HSE competence framework
Technical and enforcement guidance review and revision	New electronic Col facility set up by GB 6/11/06. Requires liaison with OPSD to coordinate with the 'saving time project'
<u>1.3 Scientific support and research:</u> Managing S&T initiative infrastructure	Ongoing; G Bell interim report to JMcC Feb 07.
Managing outcomes from S&T initiative	Policy agreed June '06 with BEU/REFIT re: software developments. Some conflict developing Jan 07 re LA priorities vs Fit3 priorities and impact on HSE resources.
Evaluation of S&T initiative	G Bell developing plan for Spring '07; initial direction agreed with Phil Scott Feb 07.
<u>1.4 e-communication systems</u> Extranet development & maintenance	New Home page design being implemented Feb 07. CDS work to develop intranet pages on extranet will require some rework of HELA extranet, CDS timescale not yet given. As of 8/11/06 GB joined new 'HSE Extranet' management group chaired by BEU.
Website and intranet web pages maintenance	Transfer of responsibility from GK to GB began in January '07. New project to deliver greater HELex/Website consistency being developed

PAPER H3/06

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

Writing and editing of LAU newsletter	Currently produced every month; working to create e-express type newsletter (could be linked with launch of HELA extranet new Home page)
<u>1.5 Support for new governance structures</u> LGP support incl briefing of HSE Senior managers and Executive HELA support	GB team also responsible for collating periodic reports on progress with partnership workstreams to HSE senior managers. GB team provide joint Secretariat with LACORS including minute taking and clearing; agreeing agenda and ensuring HSE papers are fit for purpose.
Partnership management group support	Developing role likely to assume significant importance involving LACORS and HSE senior Managers.
<u>1.6 Maintaining/coordinating internal links</u> Policy Group, Sectors, SU & HU, FOD etc	Occasionally high priority role ensuring information etc is provided to LA audience in appropriate & timely ways; current focus on revised topic inspection packs (TIPs). SU TIPs launched in Dec 06 (except Noise & Vibration due in Feb '07). HU revision processes being chased by FIT3 programme office
Objective 2 : to shift the focus (from infrastructure development for the partnership) to field-based delivery	
<u>2.1 FIT3 liaison and support:</u> Support for annual planning	GB took over role from Kath Heywood on 1/11/06 and has ensured LACORS representation at FIT planning & Delivery meetings. PM buddying system in place linking projects with partnership teams. Graham B is progressing S&T perspective
Support for LA feedback & project reporting	In year quantitative reporting by LAs was been patchy as expected. AD Wrote to LAs in November 06 cancelling need for further in year returns. BEU able to provide business analysis support where IT/Software issues may be involved.
Facilitating FIT3 contact with LAs and other internal/external stakeholders	LAU act as facilitator/mediator as required.
<u>2.2 Partnership team projects</u> List of potential projects to be agreed with PMs	Potential projects to be discussed and agreed with PMs following recruitment of replacement PLOs during April 07
Objective 3 : to strengthen the links to business, to LAs' wider objectives, and to relevant government departments	

PAPER H3/06

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

<p><u>3.1 LOPP, LAPS and FOILE</u> Support for LOPP/LA interface and communications</p>	<p>GB role to mediate between LOPP, LACORS and Account Managers and Directors for jointly enforced and LA enforced LOPPs e.g. Tesco, Asda, B&Q, HBOS, Greggs</p>
<p>Support for LOPP expansion/development beyond March 07</p>	<p>Not yet agreed - in negotiation with LACORS. Agreed outcome expected by March '07</p>
<p>Ongoing support and development of LAPS (incl 3-way LAPS) incl links with FOILE that could result in new LAPS</p>	<p>Working with FOD where jointly enforced businesses become FOILE candidates and can therefore become 3 way LAPS. Latest 3-way LAPS is a sector based one with British Frozen Foods Federation launched Jan 07.</p>
<p>Support to LBRO review of LOPP/LAPS/HAP etc</p>	<p>BRE now taking an increased interest in this work. GB sits on expert working group and has provided information to deadline as requested plus other support; AD sits on Management Steering Group.</p>
<p><u>3.2 Liaison with FSA</u></p>	<p>Likely to become wider than current due to LBRO/Hampton pressures. More informal but regular liaison over priority planning issues is likely as a result of review of LAC 67/1 and FSA risk rating system. FSA have also sought HSE policy and views re LA auditing on 20/11/06. FSA invited to HELA task & finish group on LAC 67/1 review for 5 March 07.</p>
<p>Objective 4: - to raise the profile of H&S within LG, against a common (with HSE) performance standard, and exploring the potential for including H&S objectives within the LAA process</p>	
<p><u>4.1 Performance management and monitoring</u> Influencing LBRO performance framework (PF) development and developments with LAAs and local PSAs Establishing performance monitoring processes and reporting arrangements</p>	<p>Need for overview of developments as LG White paper from DCLG also covers this area and BRE may also play a role in development. New PF expected for 2009.</p>
<p><u>4.2 HSC guidance/S18 'standard'</u> drafting support guidance, consultation, piloting and launch/publication</p>	<p>Progress reported to HELA 11/10/06. Agreed to "shadow run" with willing EAs from 04/07 for adoption by 04/08. Volunteer LAs and FOD division being sought Feb 07.</p>
<p><u>4.3 Audit</u> Establishing common audit processes for all EAs</p>	<p>Current view is to develop self-assessment technique against new S18 standard</p>
<p>Objective 5: - to maintain a strong emphasis on communications, in particular to address the "hearts and minds" challenges that remain inside HSE</p>	
<p><u>5.1 Comms plan</u></p>	<p>Plan and bids for 07/08 submitted to Comms Directorate deadline. LACoRS invited to Comms VDC Feb 07</p>

PAPER H3/06

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

<u>5.2 Hearts and Minds plan</u>	Core pack developed 26 Oct '06; induction briefings for all new HSE staff begun 16/11/06
<u>5.3 Annual partnership conference and exhibition</u>	Successfully delivered on 12/12/06; First planning meeting for next event Feb 07.
<u>5.4 Revised elected members handbook</u>	Launched at Partnership Conference 12/12/06
<u>5.5 Development and production of Partnership Annual Report</u>	05/06 Annual Report completed /launched at Partnership Conference 12/12/06
<u>5.6 Liaison with CDS/CoSAS re gathering and processing of statistical information</u>	Incl. use of new partnership branding and agreeing final version of LAE1 for 06/07.
<u>5.7 Preparation and publication of LA prosecution database</u>	05/06 Prosecution Database completed and published Dec 06.
<u>5.8 Liaison with press office re press releases, articles etc</u>	Ongoing - AD clears press releases, articles etc as necessary
<u>5.9 Liaison and promotional work with professional bodies</u>	Ongoing - Includes speaking and supporting HSE speakers at CIEH/REHIS events.
Objective 6 : to develop (a) a set of outcome-focused success criteria for the partnership, to enable a view to be taken at an appropriate time of the balance of costs and benefits; and (b) a proportionate process for gathering outcome information from partnership work, in order to inform the cost/benefit judgement	
<u>6.2 Evaluation</u> Evaluation of programme – monitor progress with existing plan.	G Bell establishing mechanism with CoSAS.
Evaluation of partnership – establish plan, measures and delivery.	'Initial thoughts' favour the idea of a 'balanced business scorecard' approach. Initial proposals revised by GB Dec 06 – needs formal linking to LAU partnership plan by Mar 07.
Evaluation of specific projects – e.g. Extranet; flexible warranting pilots, revised training support, S&T initiative etc	HELA extranet evaluation currently restricted in scope due to lack of research funding.
Objective 7: to deliver those elements of LASP which have become dependent on progress with the Better Regulation agenda and therefore remain outstanding following the conclusion of LASP and in doing so, to take an active role in relevant BR initiatives, promoting our experiences as an exemplar of good central/LG relationships	

PAPER H3/06

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

<p><u>7.1 Datasharing</u> HSE/EA pilot development</p>	<p>Initial discussions in October have led to more concrete proposals being taken forward by Better Regulation Branch in HSE. BRE and Treasury have hinted that funds might be available for some of this work, which needs also to encompass LA dimension E.g. Sharing Prosecution/Notice data; asbestos licensing and notification/Waste transfer links.</p>
<p><u>7.2 REP</u> Support for REPs ongoing development/impact</p>	<p>AD is part of Management Steering Group; BM for GB continues to act as LAU representative at working level on REP by special agreement with FOD ESE Division. New governance procedures expected following BRE takeover and informal OGC review. REP update meeting for GB and BM 26 Feb 07</p>
<p><u>7.3 Support to LBRO not referenced elsewhere above.</u></p>	<p>NO'D is on secondment to BRE until Jan 08.</p>
<p><u>7.4 Support work with RHING</u></p>	<p>AD to organise next meeting in early '07 to establish role of Chief Executives and Chairs of 7 thematic regulators</p>
<p><u>7.5 Liaison with LSIF/Audit Commission</u></p>	<p>Allan Davies & Phil Scott generally lead at SCS level whilst N O'D takes lead elsewhere whilst on secondment to LBRO. Needs a watching brief as LSIF perceive policy overlap and conflict with LBRO/ BRE.</p>
<p>Objective 8 : to give effect to the decisions of the HSE "Fundamental Review", which concluded that the LA/HSE partnership was a vital contributor to HSC's strategic delivery framework, and should be sustained and developed to become "the way we do business"</p>	
<p><u>8.1 Official correspondence and enquiries</u> Responses to PQs, Ministerial submissions, TO's etc</p>	<p>As and when and as per agreed deadline with Secretariat. London LAU take lead.</p>
<p>General enquiries and concerns from and about LA H&S regulators</p>	<p>As and when but Bootle LAU take lead</p>
<p><u>8.2 Finance and budgetary control</u></p>	<p>AD agrees plans etc for PEFD.</p>
<p><u>8.3 Interviewing & appointment of and support for inward/outward secondments</u></p>	<p>New PLOs to replace outgoing tranche will be required shortly; recruitment process for 5 new secondees begun Feb 07.</p>
<p><u>8.4 HELA innovation/best practice awards</u> Judging HELA innovation/best practice awards with recommendations to HSC and subsequent promulgation via e-comms systems</p>	<p>GB and AD did judging on 20/11/06, HSC agreed recommendations end Nov; winners to be told in time for speeches to be prepared for Partnership Conference on 12 Dec.</p>
<p><u>8.5 Teamworking/collaboration with LACoRS</u></p>	<p>Ongoing – includes all the above plus regular two monthly 'team' meetings</p>

PAPER H3/06

LOCAL AUTHORITIES AND HSE PARTNERSHIP PROGRAMME

Coordinating input to legislative etc reviews	Role is to ensure LACORS are consulted; LAU only comments directly where strictly necessary i.e. where LAs views haven't been sought/taken into account/understood by HSE
---	---