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HEALTH AND SAFETY COMMISSION

Draft statement of principle on Worker Involvement and Consultation on occupational health and safety

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Cleared by Sandra Caldwell, Co-Director, Policy Group on 22 October 2003

Issue

1. To agree the attached draft statement (see Annex A) setting out the principles and measures considered vital to help us to achieve our goal of securing greater worker involvement and consultation on occupational health and safety. If agreed the statement will then serve as a core document for a number of stakeholders to sign and make public. The approach adopted in the statement is founded on the belief that it would be better to concentrate our resources on non-regulatory measures that will better assist us in reaching our goal. The paper also sets out emerging thinking concerning the creation of a Challenge Fund for extending workplace safety advice in small and medium size businesses announced by the Secretary of State for Work and Pensions on 2 October 2003 (see Annex B).

Timing

2. Routine.

Recommendation

3. That the Commission is asked to :
- (a) consider the attached statement (Annex A) and, subject to their views, agree that it should form the basis of our work to achieve our goal of greater worker involvement and consultation on occupational health and safety (see paras. 13 – 15 below);
 - (b) agree that work on developing new Regulations should not go ahead at this stage and to the publication of the reasons for this decision to stakeholders including trade unions and employers' associations (see paras. 8 – 12 below);
 - (c) agree the statement as the basis of advice to Ministers on the way forward (see paras. 13 – 15 below);
 - (d) agree the publication of the statement and work to secure stakeholder support (see paras. 13 – 15 below);
 - (e) note the development of the emerging arrangements and options for the rollout of the Workplace Safety Advice Challenge Fund ["Challenge Fund"]. (see paras. 16 – 18 below).

Background

4. At its meeting on 15 July 2003 the Commission considered draft consultative proposals for new Regulations and other non-regulatory measures designed to promote greater worker involvement and consultation on occupational health and safety (see HSC/03/83). The Commission had previously asked the HSE to develop draft consultative proposals that took account of the bigger picture including the changing economy and nature of employment and to ensure that the proposed measures fitted well with the HSC/E's new strategy for workplace health and safety.
5. The draft consultative proposals presented to the Commission on 15 July 2003 included new Regulations to harmonise the Safety Representatives and Safety Committees Regulations 1977 and the Health and Safety (Consultation with Employees) Regulations 1996. The Commission in its consideration of the draft consultative proposals raised concerns that the document failed to set out the case for worker involvement and consultation or explain the role of safety representatives and the benefits they bring in improving health and safety. Nor did the document set out the role trade unions play in ensuring and promoting greater worker involvement.
6. The Commission concluded that the production of draft consultative regulatory proposals that commanded the support of a wide range of stakeholders was some way off. HSE needed a clear steer on fundamental issues in order to take the work to develop measures for promoting and encouraging greater worker involvement and consultation forward.
7. Commission members will also be aware that Andrew Smith, the Secretary of State for Work and Pensions, announced, on 2 October 2003, the creation of a new Challenge Fund with Government working with unions and employers to extend workplace safety advice in small and medium sized businesses building on the success of the HSC's Workers' Safety Advisor Pilot. The Health and Safety Commission has been asked by DWP Ministers to develop proposals for rolling out the Challenge Fund – DWP has indicated a sum of £3m has been made available over the three year period 2004/5 to 2006/7. Construction, Voluntary and the Retail sectors have been identified in previous Commission discussions as possibilities for the focus of Challenge Fund activity. We are currently exploring the feasibility and practicability of arrangements needed for the rollout of the Challenge Fund planned for 1 April 2004. The emerging issues are set out at paras. 16 - 18 below and in Annex B attached.

Argument

Developing a way forward

8. Previous consultations have shown the policy of the Government and the Commission to secure greater worker involvement and consultation has considerable stakeholder support. What is absent at present, however, is a consensus among stakeholders concerning the principles that should guide us in framing measures in pursuit of that goal. There remains a significant difference of views about the precise nature of the rights and obligations the law should provide. Nor must we lose sight of the provisions of the Framework Directive concerning worker involvement in occupational health and safety currently enshrined in UK law.
9. The draft consultative proposals for new Regulations considered by the Commission at its meeting on 15 July 2003 (see HSC/03/83) were seen as complex and

bureaucratic. Nor did the Commission find any evidence that the proposals, built around new rights for workers to determine for themselves whether or not they wish to be represented, would produce the desired benefits and improvements in worker involvement and consultation.

10. Following the Commission's consideration of draft consultative proposals in July 2003 we explored options for new Regulations that are relevant to the needs of all employers and workers in the modern economy and contribute to our goals on worker involvement and consultation. Officials met with the CBI and TUC to explore the possibility of securing broad agreement on an effective regulatory approach that met our goal of rights for all workers to be involved and consulted on occupational health and safety. While considerable agreement exists, it is clear that we are some considerable way off producing regulatory proposals that will be acceptable to stakeholders and that will contribute to the achievement of our goal. It is the view of the Chair and officials that it would be more beneficial to concentrate our efforts on new measures to further our goal, including best use of the Challenge Fund, than committing further resources to the development of new Regulations. Work concentrating on measures to build partnership and capability, including rolling out the Challenge Fund, would produce far bigger benefits. **However, there are issues concerning the 1977 Regulations and the 1996 Regulations on which we would welcome the Commission's advice (see paras. 11 & 12 below).**

11. The draft regulatory proposals considered by the Commission in July 2003 included a proposed new duty on employers to respond to formal representations made by safety representatives in the exercise of their regulatory functions. We set out in the draft a belief that the new duty could provide a safety net for employers and safety representatives by highlighting unresolved health and safety issues. There appeared to be wide-ranging support for this proposal and concern that on occasions the representations of safety representatives on serious health and safety failings were being ignored. **We would welcome a steer from the Commission as to how we should proceed on this issue.**

12. HSE has over the last few months received a growing number of complaints from safety representatives about difficulties they have encountered in obtaining information on health and safety considered vital to the performance of their functions. Examples have been cited of employers not providing access to information concerning the health and safety of colleagues and in particular information contained within the Accident Book. Concerns have been raised by employers that the provision of such information would breach Data Protection law. It is our understanding that disclosure in accordance with the 1977 and 1996 Regulations is not prohibited by the Data Protection Act 1998 - that is, personal details should remain confidential unless, for example, the individual concerned has consented to their release. However, the absence of such consent does not prevent employers from releasing information that happens to contain personal details, although the employer would first be required to anonymise the information made available to safety representatives. We are currently formulating proposals to improve the content and disclosure of the Accident Book to ensure safety representatives effectively carry out their functions on a properly informed basis. **We will return to the Commission to report the proposed way forward to tackle the current problems being encountered by safety representatives.**

We recommend that for the reasons given above further work to develop new Regulations should not proceed. Is this acceptable to the Commission?

A statement on worker involvement

13. At the request of the HSC Chair officials have produced a draft statement for the Commission's agreement (see Annex A) that sets out the principles and measures that should underpin our work. It is essential if we are to secure broad political agreement around this core document that the statement incorporates evidence including robust and persuasive data, evidence and case studies that support the case for worker involvement and consultation on occupational health and safety and clearly identify the social and business benefits this approach brings.

14. We need to re-consider and agree the principles that should underpin our goal of greater worker involvement and consultation. We also need to confirm that we have properly scoped the problems that we need to address and the measures considered necessary to achieve our goal. The draft statement attached (see Annex A) sets out the principles that should guide us, defines the problems that we need to overcome and the measures we need to put in place. The statement also contains evidence including data and case studies that are intended to identify the best measures that should be at the heart of our work.

15. Bill Callaghan plans for an early meeting with Des Browne, Minister for Health and Safety and senior representatives of the CBI and TUC to win their support for the statement. If an agreement on the core document is reached, underpinned by broad political, financial and partnership commitments, it is intended to publish the statement and undertake work to win stakeholder support.

- ***Does the Commission agree the principles and measures set out in the attached statement as the basis for our future work?***
- ***Does the Commission agree the statement as the basis of advice to Ministers on the way forward?***
- ***Does the Commission agree the publication of the statement and work to secure stakeholder support?***

Workplace Safety Advice Challenge Fund

16. The announcement by the Secretary of State for Work and Pensions on 2 October 2003 concerning the setting up of the Challenge Fund was warmly welcomed by the HSC Chair on behalf of the Commission (see HSC Press Release CO:52/03). HSE is currently in discussions with DWP concerning the precise terms of the funds made available and also exploring the feasibility and practicability of the arrangements that need to be put in place to roll out the fund. We will need to move quickly to have the arrangements for managing the fund in place for commencement in April 2004, the time when the funding becomes available. The background to the announcement and some of the emerging issues concerning the setting up of the fund are set out at Annex B.

17. The most effective and efficient way to manage the fund, taking account of the competences and attributes needed to take on such responsibility, would in our view better be met through contracting the work out. The management and administration of the fund is not part of HSE's core business. We will seek nominations from social partners for

membership of a Management Board which is intended to make key decisions concerning the operation of the fund and to whom the contractor will report and account. Key functions of the Board might include: appointment of the WSAs, consideration of applicant needs for WSA support, approval of support, monitoring performance of the contractor and the achievements of the WSAs, employers and their workers. They will be looking for innovative ideas from organisations looking to secure support and clear evidence of commitment to improving greater worker involvement and to better health and safety. We should aim for a state where competition for support outweighs demand and where funding is the reward for successful applications.

18. We are also exploring with DWP arrangements that will be needed to ensure accountability, value-for-money and delivery of our intended outputs. In the attached annex (see Annex B) we also explore two options for operating the challenge fund. **Option 1** the approach adopted would be based on the WSA Pilot, ie employers identified and recruited by the fund contractor on the basis of criteria set down by the Management Board whereas for **Option 2** employers would apply for a grant of a sum of money to buy WSA time in effect and which would be assessed and decided upon by the contractor again according to criteria laid down by the Management Board. We recommend, on the basis of available evidence set out in Annex B attached that Option 1 should be pursued.

HSC is asked to note the emerging issues concerning the management and operation of the fund, comment on the sectors we have identified for participation and more generally raise any other issues key to rolling-out the fund. We recommend that we adopt the management model used in the WSA Pilot.

Consultation

19. We are aiming to get the views of key external stakeholders in time for the Commission consideration of this paper and will report back emerging views.

Presentation

20. The Commission will have a key role to play in helping to publicise and explain our new direction on worker involvement and consultation as set out in the draft statement. Some members of the trade union movement will be disappointed that for the most part regulatory measures explored in earlier consultations will not go forward. We will aim to produce a draft handling and publicity strategy for the Commission's earliest consideration. In particular, we have much work to do to ensure the contribution that trade unions make to occupational health and safety is widely understood and publicised – it is essential that we build on and develop our existing contacts with trade unions and their safety representatives to take forward the measures described in the statement.

Costs and Benefits

21. The draft consultative document considered by the Commission on 15 July 2003 included a draft Regulatory Impact Assessment only for the proposed regulatory measures. We are keen to assess how the non-regulatory measures described in this paper are likely to impact in cost and benefit terms and will begin this process once the outcome of the Commission's consideration is known.

Financial/Resource Implications for HSE

22. We have consulted PEFD concerning the resourcing arrangements needed to roll out and support the Challenge Fund and other activities described in the statement (Annex A, section 5). It needs to be borne in mind that the resources provided by DWP to support the roll out of the Challenge Fund will only be available from April 2004. The resources needed to get the fund up and running, including the work of setting up the Management Board, the contract tendering process and supporting publicity, in the months leading up to the April 2004 is likely to amount to some £100k over the next six months. This money could be found from a re-allocation of other resources currently earmarked for developing a WSA action plan.

23. Much of the resources needed to take forward other non-WSA activities and policy development set out in the statement can be found from the savings from ceasing work on the new Regulations. However, a campaign to bring the importance of involvement and consultation home to millions of workers and employers and equipping them with the necessary skills and competence would consume considerable unbudgeted resources. The Commission will need to bear this in mind when considering the programme of activities described in the statement.

Environmental Implications

24. None.

Other Implications

22. It is intended that the statement on worker involvement and consultation on occupational health and safety is applicable to Great Britain including Scotland and Wales although the mechanisms for taking these measures forward may vary for the devolved administrations. The Commission will be kept informed of progress of discussions with the devolved administrations.

Action

25. The Commission is asked to agree the recommendations set out at para. 3 above.

A Draft Collective Declaration on Worker Involvement

[For HSC/Minister/CBI/TUC/others to agree and sign]

1. Introduction.

The statements below set out why we support getting more workers involved in health and safety and what we agree to do about it. A statement of the challenges ahead motivate us to meet these problems head-on; the statement of principle describes what we believe; the evidence and case studies show why we believe this and the measures we think will deliver improvements are agreed and based on evidence we support.

HSC's strategy for 2004 –2010 and beyond makes it clear: we must develop a greater reliance and trust in others if we are to have a second-to-none health and safety system. We think now is a good time to come together and sign this declaration: successful organisations increasingly encourage the dynamics of trust, innovation, commitment and connectivity between workers and employers and health and safety must be treated in the same manner. Workers must now figure more in the health and safety system and share in the collective responsibility for maintaining Great Britain's world-class health and safety record. We agree to do what we can to make this happen.

2. A statement of the Problem.

Great Britain has changed how it works. Factors such as changes to the labour market and the growth of industries biased towards intellectual capital we believe has led to the following situation:

- There are not enough employers who properly involve and consult their workers on health and safety.
- There are not enough workers who are willing to come forward and take on health and safety responsibilities.
- The 'classic' trade union model of worker involvement through trade union safety representatives is diminishing as the structures of work change.

We recognise that for historical reasons the trade union movement has been the basis for encouraging and supporting workers who want to get involved in health and safety. Regulations have reflected this with the 1977 Regulations giving extensive functions to trade union appointed safety representatives. We support the invaluable contribution they continue to make to health and safety.

However, with changes to work patterns there is now a danger of significant reductions in consultation with workers by employers on health and safety. It is our belief this reduction will eventually undermine a great deal of the work to improve health and safety and stop us from achieving our targets.

3. A statement of the Principle.

All workers have a right to work in conditions that are safe and which do not cause them to suffer any detriment to their health.

Workers who have a voice, influence, discretion and responsibility in health and safety are safer and healthier than those who do not. An involved and consulted workforce would be a major achievement and be the foundation for getting health and safety recognised as a 'cornerstone of a civilised society.'

An actively engaged workforce is the bedrock supporting other interventions on health and safety. It provides a 'reality check' for employers from the shop floor and helps ensure activities on health and safety lead to compliance.

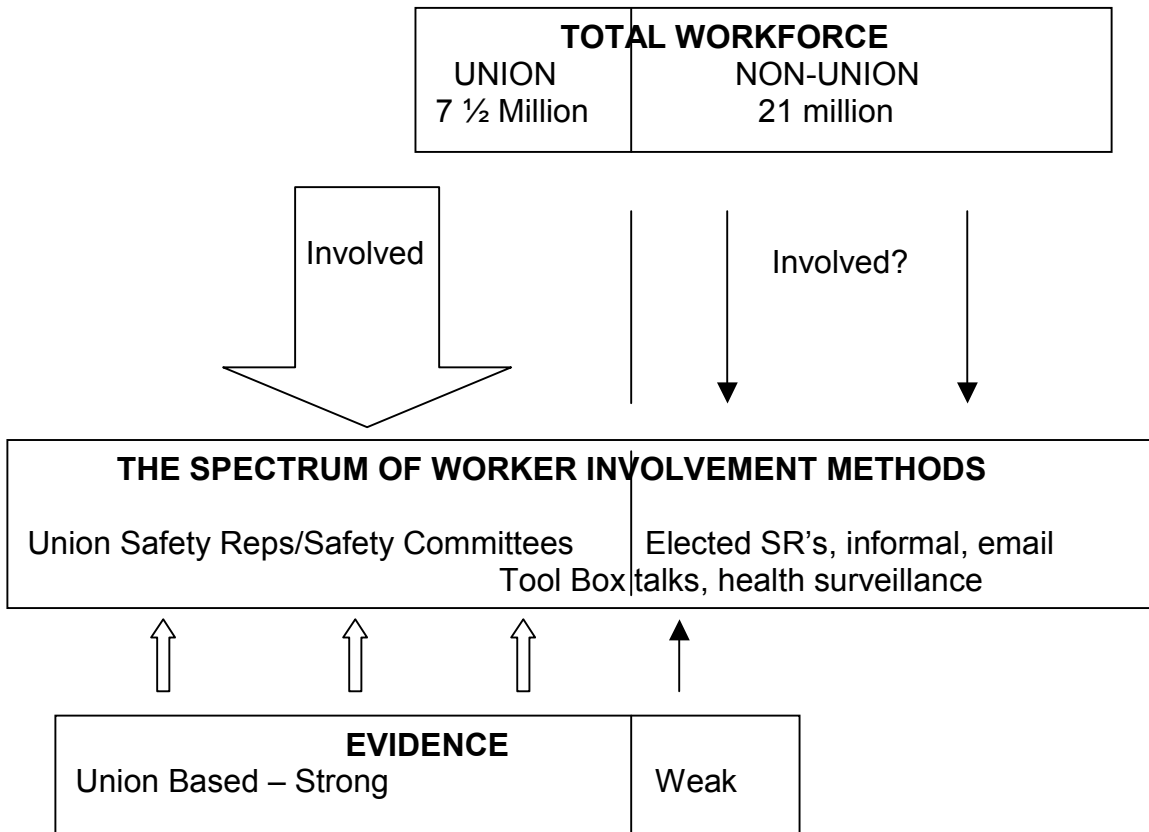
By 'involvement' we specifically mean relationships between workers and employers based on collaboration and trust and nurtured as part of the management of health and safety. Such relationships may be expressed in a variety of joint working arrangements between workers and employers, eg safety representatives (trade union or otherwise), safety committees (trade union or otherwise), work councils and direct involvement between employers and workers.

These 'trust' relationships will build a shared vision on health and safety and if enough organisations encourage them together they will reduce the overall need for state regulation.

4. A statement of evidence.

We believe the statement of principle is based on evidence. We also believe there is a 'spectrum' of methods for how workers can be actively involved and consulted on health and safety. It may be by email, attendance of toolbox talks, workers engaged in health surveillance activities or be represented by a safety representative and sit on safety committees. Organisations need to assess the goals it needs to achieve to ensure good occupational health and safety and deploy the appropriate methods and techniques for worker involvement and consultation to achieve them.

However, there is an imbalance in the evidence showing the impact of these range of methods and can be summarised diagrammatically:



There is strong evidence of the positive impact trade unions have on health and safety performance, “revealing that unions gravitate to accident-prone workplaces and react by reducing injury rates”¹. There is further evidence that safety representatives, through their empowered role in consultation “shows the strongest relationship with safety compliance”².

On the other end of the scale there is less evidence for methods of involvement and consultation in small businesses where trade unions are not recognised and are without safety representatives. Historically research has not penetrated in these areas and our understanding of what works is limited here. Of course this is the business environment for most businesses and about half the workforce. We need to improve our understanding of what works best for small businesses and produce appropriate solutions that are soundly based on the evidence.

However, we believe evidence exists of initiatives that can inspire and be adopted by many different kinds of organisations. Though with the invaluable support and involvement of trade unions and their representatives, initiatives to reduce injury and fatalities in the paper industry used a variety of methods for improving the management of health and safety. “Central to the initiative was the production of action plans by individual UK paper mills. These were implemented and monitored through the participation of both

¹ Trade Unions and Industrial Injury in Great Britain, Adam Seth Litwin, LSE, Centre for Economic Performance, 2000.

² Safety Behaviour in the Construction Sector, HAS/HSE Northern Ireland by Nick McDonald and Victor Hrymak.

management and employees”³. The organisations that were by far the most successful and delivered the most dramatic reductions to injuries were those where workers discussed, contributed and took ownership of these action plans. We believe these lessons can be translated into many kinds of business environment.

The Worker Safety Adviser (WSA) Pilot was another good example of where partnerships between trade unions, employers and workers can lead to improvements. “Over 75% of employers reported that they had made changes to their approach to health and safety as a result of the pilot, including joint training for managers and workers, involving workers in risk assessments and controls and producing new or revised policies and procedures”⁴.

The available evidence and case studies, we believe, show the health and safety, social and business benefits of involving and consulting with the workforce. These are in the appendix.

5. A statement of activities

There are number of activities that we will contribute to and that we believe will help us to achieve our goal of getting more workers and employers working in partnership on health and safety:

- We support the Worker Safety Adviser (WSA) approach for leveraging in improved consultation and partnership between workers and employers in small and medium sized organisations. We will find the resources to fund and support similar projects to deliver increased and improved worker involvement including access to information and third party advice.
- We will not spend more time on trying to ‘harmonise’ the regulations dealing with safety representatives. Our view is that we cannot mandate for consultation between unwilling partners and so the amount of work to produce effective regulations agreeable by all would far outweigh the impact they would have.
- We will focus on campaigns to bring the importance of involvement and consultation home to millions of workers and employers, making it relevant to them and giving them ideas for achieving it.
- We want an informed and knowledgeable workforce. We will work to ensure sufficient channels for training and development of workers to give as many workers as possible the opportunity to get the ‘competence’ and skills required for involvement in health and safety.
- We will discuss with HSE and LA’s, including enforcement colleagues, about practical steps that could be taken to help move this agenda forward.
- We will work with all stakeholders to deliver the changes we are seeking.

³ The effectiveness and impact of the PABIAC initiative in reducing accidents in the paper industry. Greenstreet Berman Ltd, HSE, CRR 452/2002.

⁴ The Worker Safety Advisor (WSA) Pilot. York Consulting with Fife College of Further Education, HSE CRR 144/2003.

- We will undertake research that is useful for helping us identify innovative solutions for some of the difficult issues we have set out.

Appendix

Evidence and Case Studies

Evidence and case studies in the next two sections show why we believe getting workers involved in health and safety is crucial. It is crucial for all workers' health and safety, it is vital for creating productive and innovative environments to work, it is important for reducing the social cost of health and safety failure and the expense of regulation and is crucial for organisations in their management of risk and reputation.

We are not claiming that workforce involvement is the only way to improve health and safety or claiming its absence stands alone as the solitary causal factor for the waste and despair of failure. All the evidence below must be read with this in mind. However, it is vital and is best seen as an irreducible element of a 'constellation' of interdependent attitudes, actions and processes that must be present in any organisation.

Evidence

A. Evidence for improved H & S through trade union models of involvement and consultation:

1. Trade Unions and Industrial Injury in Great Britain, Adam Seth Litwin, LSE, Centre for Economic Performance, 2000.

"Using WERS 98 this paper establishes a cross-sectional link between trade unions and occupational injury rates, revealing that unions gravitate to accident-prone workplaces and react by reducing injury rates."

Where there is a union presence the workplace accident rate is 74% lower than where there is no union presence. (0.0155 compared to 0.0207 respectively).

2. Unions, Safety Committees and Workplace Injuries, No.31. Dept of Economics and Applied Econometrics Research Unit. Paci, Reilly and Holl.

"The paper exploits the Workplace Industrial Relations Survey from 1990 (WIRS3) to examine the determinants of workplace injuries for a sample of manufacturing establishments in Great Britain."

- Organisations with union safety committees have 50% lower injury rate per 1000 than average
- Organisations with non-union safety committees have 40% lower injury rate per 1000.
- The weakest reducing effects on injury rates are when management deals with health and safety without any form of worker consultation.

3. Safety Behaviour in the Construction Sector, HAS/HSE Northern Ireland by Nick McDonald and Victor Hrymak.

"The goal of the research was to investigate the factors that influence safety behaviour and compliance with safety requirements on construction sites.

The presence of a safety representative on site shows the strongest relationship with safety compliance. It appears that safety representatives influence safety compliance through their influence on responses to audits and hazards, encouraging the reporting of hazards and help ensure these reports lead to better safety.

“This study demonstrates the potentially strong role which safety representatives can play in influencing both behaviour and compliance with safety requirements. All sites should have safety representatives and their role and functions should be reinforced as part of the safety management system.”

4. Worker representation in health and safety: Options for regulatory reform, *Industrial Relations Journal*, vol.33, no.2, page 141-156, June 2002. P. James and D. Walters.

UK professors Phil James and David Walters conclude: “a variety of studies, both in this country and overseas, have found the collective representation of workers to have beneficial consequences for standards of worker protection, particularly when it operates through trade union channels. In particular, several of these have highlighted determination of health and safety by management and lowest where mechanisms of union-based representation are present.”

5. The Healthy Workplace? A Robinson and C Smallman. *The Judge Institute of Management Studies*, 3 March 2000.

“The proportion of employees who are trade union members has a positive and significant association with both injury and illness rates. The arrangements associated with trade unions – formal OHS arrangements of committees and representatives – shows these lower the odds of injury and illness when compared with arrangements that merely inform employees of OHS issues.”

“The odds of illness seem to be more conditioned by the presence of more formal committees (general and specific) which deal with health and safety matters. Lower injury rates, on the other hand, are more likely to occur in the presence of OHS representative.”

6. Safety Cultures: Giving Staff a clear role. HSE, CRR 214/1999

“The first people to realise something may be going seriously wrong in an organisation are usually those who work there. Yet employees often do not voice such concerns or they voice them in the wrong way. Where staff concerns about health and safety are not raised the implications can be disastrous – Clapham Rail Crash, Piper Alpha Explosion (this killed 67 people and cost an estimated £2 billion).

“Employees tend to report concerns via the route that they perceive as being most effective. There is a far greater willingness to report concerns over equipment, procedures etc. than over the behaviour of an individual. In organisations with poorer safety cultures, the union and safety rep. are seen as being highly effective routes for raising health and safety concerns. Personnel are not.”

B. Evidence for the business benefits of worker involvement (Health and Safety and general):

7. The effectiveness and impact of the PABIAC initiative in reducing accidents in the paper industry. Greenstreet Berman Ltd, HSE, CRR 452/2002.

“In three years the cost of the PABIAC initiative was cost neutral. That is the initiatives cost £21.6 million and in three years the cost reductions of averted injuries and other costs was about £20 million. Major and fatal injury rates have reduced by about a quarter across the entire industry, in three years.”

What were the initiatives?

“In 1996 the Graphical, Paper and Media Union prompted the Paper and Board Industry Advisory Committee (PABIAC) to find ways to improve safety culture and safety management.

“A key element of safety culture concerns workforce involvement and consultation. Poorer mills failed to recognise the importance of workforce involvement in terms of developing accepted safety measures, which led to increased enforcement and also resulted in a failure to modify the failing systems.

“Central to the initiative was the production of action plans by individual UK paper mills with the intent of formalise and document risks assessment and risk control processes. These were then implemented and monitored through the participation of both management and employees.

“PABIAC initiative was cited as the reason underlying the massively improved cooperation between management, safety representatives and employees in the development of appropriate risk controls.”

8. The Healthy Workplace? A Robinson and C Smallman. The Judge Institute of Management Studies, 3 March 2000.

“Our contention is that organisations reap significant benefit in looking after the welfare of their employees and ensuring a safe and healthy workplace.”

“Lam and White (1998) argue that firms with a strong human resources orientation are likely to enjoy substantial cost savings by reducing employee absenteeism and turnover rates. These firms develop a more competence workforce through a stronger emphasis on recruitment, compensation, training and development. Guest (1999) found that progressive human resources management (HRM) is associated with higher ratings of fairness, trust and management delivery.”

“Boxall and Steeneveld (1999) find a strong link between HRM style and competitive advantage. Of these practices one in particular has been found to be important. Fuller (1999) develops a strong case for the role of employee participation in developing effective safety management systems.”

“The influence of employee representation on health and safety is well established, particularly in the industrial relations literature. Codrington and Henley (1981), Hebdon and Hyatt (1998), MacIntosh and Gough (1998), Mayhew and Quinlan (1997), Rebitzer (1995) and Reilly et al (1995) each find that trade union membership has a strong influence over health and safety performance. Outside of unionism the form of health and safety arrangements is a critical issue and both Reilly et al (1995) and Weil (1999) find evidence to support the efficacy of OHS committees.”

9. Rehabilitation – the workplace view. A TUC report, July 2002. Labour Research Department.

“Employers willing to work together with employees and their unions are more likely to make a success of rehabilitation. One symbol of this is sickness-absence statistics, which are more likely to be made available in good practice workplaces, and are generally given to health and safety committees or union reps rather than the workforce as a whole. This was the case at 38.1% of the good-practice workplaces.”

10. Partnership at Work. Dr John Knell, Industrial Society. DTI (1999).

“The success of new work systems is seen as being dependent on the development of high-trust relations with the whole workforce.

“Our evidence suggests that whilst a partnership approach is usually prompted by managers in the first instance, it falters unless the organisation quickly achieves support from all parties. The practical implication of this is that for partnership to feel authentic to employees they have to be given increased voice, influence, discretion and responsibility.

“All of the firms in this study assert that adoption of a partnership-based approach has helped them achieve enhanced competitive performance. For example:

- Borg Warner had doubled the size of its workforce and increased its turnover by 60%.
- Trifast has doubled its turnover and workforce and trebled its profits.
- More broadly they all reported low levels of staff turnover and absenteeism.

C. Evidence for existing worker involvement in a workplace:

- Safety Culture: A review of the literature 2002, HSL (Human Factors)

“A review of the safety climate literature revealed that employees’ perceptions of management’s attitudes and behaviours towards safety, production and issues such as planning, discipline etc. was the most useful measurement of an organisation’s safety climate.”

“Vassie and Lucas (2001) found that organisations who used supervisors within the work environment had little employee involvement in safety activities and showed a lack of specific health and safety communication to staff.”

Case Studies

We consider Case Studies as vital for seeing how worker involvement can be made to happen effectively in a variety of circumstances. It is essential for others to use and copy what works and should be the basis for any campaign publicising how to get more workers involved in health and safety.

1. The effectiveness and impact of the PABIAC initiative in reducing accidents in the paper industry. Greenstreet Berman Ltd, HSE, CRR 452/2002.

Mills with good safety cultures typically had accepted definitions and standards of safety related behaviour. Typically, good mills had got this message across by 'getting people on board' by a variety of methods:

We surveyed the workforce on what they understood safety to be, and went from there;

We focussed on attitudes, training, systems of work and involvement;

It's about hearts and minds and leadership, far more than it is about systems.

2. "Involving employees in health and safety. Forming partnerships in the chemical industry." HSE Books.

At a major hazards site in the chemicals industry, a wide-range of problems is being tackled by Continuous Improvement Teams (CITs). These give real control and ownership of site processes to workers whose knowledge and expertise was previously not fully tapped. The teams review current onsite activities and make recommendations to managers for improvement. The results have included the introduction of new equipment, amending and introducing procedures, redesign of equipment and raising awareness. The teams continue to monitor the results of any changes.

The teams comprise a wide variety of staff, comprising technicians, supervisors, resident contractors and sometimes managers. A manager acts as a project champion for each CIT to monitor progress and provide resources, etc. All team members attend a two-day training course on the role of CITs and problem solving techniques. Three years after setting up CITs 232 of the 300 employees and also 16 contractors had participated in them.

3. "Employee involvement in health and safety. Some examples of good practice." HSL Report.

Accident statistics showed that maintenance employees on a particular site were consistently having the most accidents. Safety systems of work were already in place but accidents still happened and the company recognised that if they wanted to change the situation, they would have to engage employees in the safety process itself.

The company began the process by encouraging employees to identify personal safety issues and develop their own safety systems of work. The new approach was introduced through a pilot group in one area of the site involving a small group of operators, engineers and a manager. This group of employees carried out risk assessments, identified the

hazards and the relevant control measures. After each work instruction was developed it was signed off by a manager to show that they took responsibility for the agreed course of action. Maintenance crew and operators also had training in isolation procedures.

This system has been running for a few years, and it is constantly being updated and reviewed through employee feedback. The fact that the operator and maintenance teams design the system has resulted in workforce pride and ownership of the whole system and decreased conflict between the two groups. The system is more time efficient than the old one and has contributed to a reduction in maintenance and first aid injuries since its introduction.

4. “HSE Business Case for Health and Safety.”

At a brick manufacturer in London, the site manager realised that while the company spent a considerable amount of money and time on maintaining the site and equipment it spent much less on maintaining their staff. The site manufactured special shaped bricks and this involved the repetitive handling of bricks and manual handling was known to be the most significant cause of site injuries. The site manager had learnt of another company who had used an osteopath to reduce such injuries.

The osteopath provided training to all staff on how the body works and how to recognise the physical symptoms when the body is under undue pressure. The osteopath also explained straightforward treatments and exercises that help prevent manual handling injuries.

The health and safety benefits of the approach has been:

- Annual days lost dropped from 60 – 34.
- Number of manual handling injuries dropped from 10 to 3.
- The injury severity rate has dropped from 30 days lost per 100,000 staff hours to 23 days lost.

5. “GMB working well together with Nestlé’s.” Case study.

A joint initiative over 3 years (1996-1999) by the GMB and Nestlé’s in York cut slipping accidents by 60%. The site is a large confectionary production unit employing around 2,000 people. In 1996, slipping accidents represented 33% of the total accidents in the workplace. By jointly planning an action plan, the GMB and Nestlé’s successfully cut the accident rates. 18 Months after the slips initiative, a similar effort was made with manual handling. Within 2 years, manual-handling accidents had been reduced by 40%.

The following were key factors in this significant improvement in accident reduction: senior managers and the GMB agreed that an initiative should be taken jointly to reduce slipping accidents, all managers, team leaders and Safety Representatives were briefed about the initiative, each site safety committee had to report their action to reduce slipping accidents on a regular basis, all slipping accidents had to be jointly investigated using a specific reporting procedure, and the initiative was periodically reviewed by the GMB nationally.

The initiative at Nestlé’s continues and the Company and the GMB are developing methods that will continually prevent accidents as part of the daily business.

6. “GMB working well together with GKN.” Case study.

During 1998, the GMB began work with the Wheels Division of GKN. It was agreed that the GMB would provide joint training for managers, supervisors, Safety Representatives and employees. The aim of joint training was to raise the awareness and importance of health and safety to ensure that GKN reduced their accident rate.

To achieve this, a number of key messages and aims were identified. Among the most important were: reinforcing the principle that good health and safety practise is desirable from both a moral and financial point of view. Compliance with relevant legislation should back up this principle not lead it, everyone in the organisation should have a common understanding of responsibilities and limitations, and developing an integrated team work approach to health and safety management.

The aims were achieved by a variety of methods and were delivered in a series of three-day training courses. The GMB Regional Health and Safety Officer, Martin Bevan delivered training, with input from the GKN Health and Safety Manager. Each training course, among other things: held a series of frank and open discussions, as the company and the union had committed themselves to a 'no recrimination' policy, was undertaken with a mixture of managers and employees from different levels within the company, covered at length individual and collective roles and responsibilities. This helped to correct some deeply held misconceptions, and ensured that a teamwork approach was fostered by coursework being undertaken by syndicates comprising of a variety of skills.

Following the GMB/GKN initiative there has been a 38% reduction in reportable accidents.

7. GMB working well together with William Baird.” Case study

The Company has now gone but the project is still valid because of what was achieved still continues in the UK and European Clothing Sector. In this example, the injuries were not perceived as serious. However needle punctures were normally first aid treated injuries rather than lost time. The driver here was insurance costs. The GMB were well organised in the Clothing Sector and most stewards knew that claims could be made for these type of injuries. To challenge a claim would be expensive so it was cheaper in many cases to pay up. William Baird self-insured for the first few hundred thousand. So there was a significant financial reason to prevent these accidents.

Rather than go down the 'awareness raising' route, the Company encouraged the site with the worst record to produce a guard that everyone was happy with, including the Risk Manager. So, the workers were involved with the design of the guard: that made it user friendly. The GMB supported the fitting of the guards: this helped with some operator resistance. The Company received a royalty payment for each of the guards sold. The concept of an encapsulating guard was successfully promoted into the new CEN standard on industrial sewing machines. Claims reduced significantly, as clearly did accidents. Up until the company closed there was not one first aid injury reported where guards had been fitted to machines. Some operators caught their fingers on the needle when they were changing thread. However, injuries where the machine was under power were virtually eliminated.

8. "A recipe for safety."

Management and safety representatives at a large food production site set up three health and safety sub-committees to look at the high rate of injuries caused by slips, trips striking against objects and burns. Their actions resulted in injury reductions of 22%, 41% and 43% respectively for the three causes of injury during the first year. A new sub-committee has now been set up to look at injuries caused by cuts.

Management and safety representatives working together at another large production site achieved reductions of 50% in slips injuries and 33% in manual handling injuries.

Much of the work on a food production site involved employees manually lifting 25 kg bags of sugar, biscuits and crumbs. The safety representatives recognised the risks and initiated joint discussions with management on the introduction of mechanical hoists and lifting aids and using competent trainers to ensure that correct lifting techniques were used.

9. General

- Safety Committees

Research by Coyle and Leopold, 1981; Beaumont et al., 1982 showed the following features are effective:

The presence of a senior manager to approve key decisions

Safety officers etc should be recognised and all members have an equal opportunity to raise issues

Feedback to and from workers should be regular

Regular meetings are pre-arranged times

Committee membership should reflect representation within the company eg. if more than one TU all should be present.

Regular attendance from all members to build solid relationships

Other elements suggested by Dickety et al.' 2002:

Minutes from each meeting to be recorded and circulated to the workforce

H & S actions assigned to individuals with time frames for review.

Discussion of accident trends and near misses."

- Communications

Often companies are good at cascading information from management downwards but less effective in establishing two-way communication. One way an organisation can improve communication from employees is through establishing boards within the workplace in which employees can highlight safety and production issues and suggest solutions to other worker problems. Cooper (1998) says that important information is best conveyed through verbal face-to-face meetings first and then posted on a notice board."

HSL, Safety Culture: A review of the literature.

WORKPLACE SAFETY ADVICE CHALLENGE FUND

Ministerial announcement

Andrew Smith, the Secretary of State for Work and Pensions, announced, on 2 October 2003, the creation of a new Challenge Fund with Government working with unions and employers to extend workplace safety advice in small and medium sized businesses. The Health and Safety Commission has been asked by DWP Ministers to develop proposals for rolling out the Challenge Fund – DWP has indicated a sum of £3m has been made available over the three year period 2004/5 to 2006/7. Construction, Voluntary and the Retail sectors have been identified as possibilities for the focus of Challenge Fund activity.

Background to Ministerial announcement

In 2000 the HSC Chair agreed with Ministers a series of measures to increase employee involvement and consultation on health and safety. The Workers' Safety Advisor (WSA) Pilot was one such measure and ran from February 2002 until evaluation concluded in April 2003. The report of the pilot was presented to the HSC in May 2003 (see HSC/03/64) – the HSC welcomed the positive findings and noted the recommendations. Following further consideration at its meeting on 15 July 2003 (see HSC/03/83) the HSC agreed the submission of the report of the WSA Pilot to DWP Ministers and the publication of the report. The report was sent to Ministers in early September 2003 and published on 15 September (see [HSC Press Release C045:03](#)).

The basis of the WSA pilot was to use people skilled in promoting employee consultation on health and safety, with experience of having served as trade union safety representatives, to work with small businesses lacking arrangements for worker involvement and consultation on health and safety. The WSA would carry out their responsibilities on a voluntary basis and with the agreement of the respective employer and their employees. The willingness of the employer and employees to work with the WSA in partnership to increase involvement and consultation, and thereby improve health and safety, was critical to the success of the Pilot.

The WSA Pilot was funded by HSE and managed on behalf of HSC/E by York Consulting Ltd (YCL). The Pilot was steered by a sub-committee of the Commission and overseen by HSE's Strategy Division.

The WSA pilot deployed nine WSAs over a nine-month period in Scotland, Wales, London, Midlands, North West and North East in the voluntary, hospitality, engineering and construction sectors. In all 88 employers voluntarily participated in the WSA Pilot and were predominately small, two thirds having less than 25 employees. In all 83 of the participating employers stayed the course. These are the type of organisations HSC/E considered would benefit most from external support, advice and participation. Considerable HSE resources were used to recruit employers.

As part of the evaluation of the WSA Pilot all employers and workers were surveyed – the survey found :

- involvement of WSAs had led to improvements in small non-unionised workplaces and their approach to health and safety. Notably these have included increasing internal communication and consultation on health and safety matters.
- the WSA Pilot successfully met the objectives of increasing employee consultation and raising health and safety standards.
- 75% of employers made changes to their approach to H & S.
- Nearly 70% of employees noted increased discussion on H & S.
- 43% of employers (10% strongly) indicated a possible willingness to contribute towards the cost of participating in any future WSA scheme.

Agricultural Pilot

The Challenge Fund may also provide scope from 2005/6 to further test the viability of the Workers' Safety Advisor concept to the agricultural sector where there is a concern about the rising fatal incidence rate for the self-employed/family farms.

Application of the Roving Safety Representative (RSR) concept in agriculture, an industry specific variation of the WSA scheme, is currently being evaluated by an HSE funded research project, due to report at the end of June 2004. HSE and the TGWU are currently negotiating the possible secondment of an experienced operational HSE inspector, with a view to developing a post-project implementation strategy. This strategy will take account of the outcome of the agricultural project, will need to address the opposition of the farm employer representative organisations and will need to consider the principles of the Statements on Worker Involvement and the terms and conditions attached to the Challenge Fund.

Management of the Challenge Fund

There appear to be two feasible options for taking the Challenge Fund forward – see diagram below. These are :

- Option 1 – WSA Pilot model
- Option 2 – Grant funding scheme

Both approaches assume that HSC/E would set up a Management Board comprising representatives from employers' associations, trade unions, professional bodies and other key stakeholders to steer and oversee the WSA Challenge Fund. We will seek nominations from stakeholders for Management Board members. We will seek nominations from social partners for membership of a Management Board which is intended to make key decisions concerning the operation and of the fund and to whom the contractor will report and account. Key functions of the Management Board might include: appointment of the WSAs, consideration of applications for WSA support, approval of support, monitoring performance of the contractor and the achievements of the WSAs, employers and their workers.

Both approaches also assume that the work of the fund would be contracted out to a third party who would manage and administer the scheme. HSE considers that there would be considerable benefits to have a skilled and competent external contractor to manage and administer the Challenge Fund. The Challenge Fund contractor would report and account to the Management Board.

The main difference between the options is that for **Option 1** the approach adopted would be based on the WSA Pilot, ie employers identified and recruited by the fund contractor on the basis of criteria set down by the Management Board whereas for **Option 2** employers would apply for a grant of a sum of money to buy WSA time in effect and which would be assessed and decided upon by the contractor again according to criteria laid down by the Management Board.

Whatever option is decided upon it is essential that all employers wanting to participate demonstrate a commitment and willingness to 'match' the funding made available through the provision of staff time, premises and support, for example, and a willingness and determination to work in partnership.

The general consensus is that the model adopted for the WSA Pilot (**Option 1**) worked well. We would have more effective control of the identification and recruitment of employers and we would be able to better target our efforts. There is a concern that a process built around application for funding (**Option 2**) would favour those organisations with the skills and expertise to complete the necessary forms and work against those organisations possibly more in need of WSA support and advice. It is possible that Option could result in demands that are difficult to manage – and the resources needed to deal with applications could be considerable. Option 2 however would put the onus on the applicant employer to define the nature of the assistance they are seeking both to improve worker involvement and to address particular health and safety issues. On the balance of evidence we recommend Option 1 as the way ahead.

HSC is asked to note the emerging issues, comment on the sectors we have identified for participation and more generally raise any other issues key to rolling-out the fund. We recommend that we adopt the management model used in the WSA Pilot – Option 1.

Challenge Fund : possible options for management and funding arrangements

