

**Priority Topics Strategic Programme
2nd Quarter Report 2003/4****Annex B1**

PSA 1. Reduce the incidence rate of fatal and major injury incidents by 10% by 2010 and achieve a 5% reduction by 2004/5.

How the target is measured:

This target is measured using the sum of two indicators: the worker rate of fatal injury and the employee rate of major injury uprated by the estimated reporting level for employee injuries. The baseline is an incidence rate of 263.2 fatal and major injury accidents per 100,000 workers. Progress against this target is assessed from trends estimated in statistical models for the indicator series in the ten-year period.

Model of Causality:

The incidence rate of fatal and major injuries is primarily affected by the high rate of major injury in the construction sector (particularly due to falls from height and slips and trips). Both the sector and the two hazard types are subject to individual priority programmes for HSE action.

PSA 2. Reduce the number of working days lost per 100 000 workers from work related injury and ill-health by 30% by 2010 and achieve reductions of 15% by 2004 and Y% by 2006 (yet to be agreed with DWP)

How the target is measured:

Progress against this target will be judged by integrating data from several sources. The SWI for 2001/02 estimates 32.9million working days were lost from work-related illness. This is much higher than previous estimates (in part due to technical differences). In 2000/01 an estimated 7.3 million working days were lost through workplace injury. The combined estimate of total days lost per year in 2000/02 is 40.2million.

Model of Causality:

The number of working days lost is primarily affected by cases of ill health (32.9 of the total 40.2 working days lost annually). The most common causes of sickness absence are stress and musculoskeletal disorders (accounting for 13.4 and 12.3 million days respectively). These illnesses are a particular problem in the health services. The construction industry loses a large number of working days due to high incidence of asbestos-related diseases, hand-arm vibration, dermatitis and hearing loss.

PSA 3. Reduce the incidence rate of cases of work related ill health by 20% by 2010 and achieve a 10% reduction by 2004 and a Z% reduction by 2006 (to be agreed with DWP)

How the target is measured:

Progress against this target is judged by integrating data from several sources. At present, estimates of the overall incidence of work related ill health come from self-reporting surveys (SWI). Since there was no SWI survey in 1999/2000, the SWI 2001/02 estimates are closest to the base year and will represent the baseline for this source. The baseline for this target is 2200 cases of work related ill health per 100,000 people employed

In addition to the SWI, HSE will make full use of a range of other data sources to measure progress with this target including the Occupational Disease Intelligence Network (ODIN), Industrial Injuries Scheme (IIS) information, RIDDOR and Death Certificates.

Model of Causality:

See PSA 2 for an explanation of types of illnesses and industry sectors having the greatest effect on the national totals.

Delivery strategy to achieve objectives

- **Work on HSC's eight priority programmes**
- **Topic based inspections carried out by HSE's Field Operations Directorate (FOD)**, concentrating upon the other priority areas and sectors and other hazards and sectors, which will have an impact on the PSA indicators.
- **Engagement of external stakeholders** - motivating them to help us deliver the PSA targets.
- **Working with the public sector (the ninth priority programme)** to ensure it leads by example on management of health and safety.
- **Working with other Government departments on shared agendas.**
- **Cross-industry initiatives focussed on changing attitudes towards management of health and safety** - these include:
 1. The challenge to the top 350 companies;
 2. Co-operation with the insurance industry; and
 3. Corporate governance;
 4. Effective involvement of workers.
- **Exploitation of opportunities, presented by HSC's statutory and mandatory activities, to contribute towards the target** (e.g. the Revitalising and Securing Health Together strategies, work with small firms, provision of information and advice, research...)

Key assumptions

Success in the other major areas of HSE work, in particular regulating major hazard industries ensures that resource is not diverted from delivery of this target into more urgent work (such as investigating a major incident or dealing with a new political imperative).

Major players, local authorities and other government departments are engaged and deliver their contribution both as employers and procurers of services

Local authorities as regulators and employers deliver a significant contribution to the targets by focussing on the priority hazard topics.

Stakeholders are successfully engaged to deliver their contribution and other government policies do not introduce adverse incentives to improving health and safety.

The socio-economic environment does not change in such a way as to introduce significant new risks to health and safety from work activities.

Delivery

PSA 1 – “fatal and major injuries” - Key Requirements for achieving this target are:					
Responsibility	Requirement	Target/assumptions for 2004/5	Assumed impact on PSA target by 2004/5	Status	
				Last Q	This Q
Falls from height	Deliver programme	5%	0.95% (19% of target)		A
Slips and trips	Deliver programme	5%	1.6 (32% of target)		G
Workplace transport	Deliver programme	5%	0.15 (3% of target)		A
Total			2.7% (54% of target)		

PSA 2 – “days lost” - Key Requirements for achieving this target are:					
Responsibility	Requirement	Target/assumption for 2004/5	Assumed impact on PSA target by 2004/5	Status	
				This Q	This Q
Falls from height	Deliver programme	15%	0.45% (3% of target)		A
Slips and trips	Deliver programme	15%	0.9 (6% of target)		G
Musculoskeletal disorders	Deliver programme	20%	4.65% (31% of target)		
Workplace transport	Deliver programme	15%	0.15% (1% of target)		A
Work-related stress	Deliver programme	No target	Contribution not quantified		G
Total			6.15% (41% of target)		

PSA 3 – “ill health” - Key Requirements for achieving this target are:					
Responsibility	Requirement	Target/assumptions for 2004/5	Assumed impact on PSA target by 2004/5	Status	
				This Q	This Q
Musculoskeletal disorders	Deliver programme	12%	4.2% (42% of target)		G
Work-related stress	Deliver programme	No target	Contribution not quantified		G
Total			4.2% (42% of target)		

Progress

Falls from Height

Indicator 1: Risk control indicators – This quarter: 8722 proactive inspections where falls from height was addressed (6433 in 1st quarter). On 499 occasions the premises inspected were assessed as having scored '4' (limited or no compliance in areas that matter) in their management of work at height issues (710 in 1st quarter). 439 improvement notices were issued (493 in 1st quarter).

Indicator 2: Hits on website – From June to August: 10348 hits.

Indicator 3: Work at Height Regulations – provision of, and level of attendance at, a number of presentations to stakeholder groups on the forthcoming Work at Height Regulations. 7 meetings (baseline average 4) with external stakeholder groups where a presentation and/or discussion on the Regulations has been undertaken. Take up of Consultation Document on the Regulations: To date 800 people have asked to be sent the CD.

SUMMARY:

- COMPARED WITH 1ST QUARTER: INCREASE IN PROACTIVE INSPECTIONS; REDUCTION IN NUMBER OF POOR SCORING PREMISES; INCREASE IN s ISSUED.
- 10 348 HITS ON WEBSITE
- 7 MEETINGS WITH EXTERNAL STAKEHOLDER GROUPS. REQUESTS FOR CD: 800. PROGRESS – GOOD

Workplace Transport

Indicator 1: Safe Site - Production of the toolkit is not now expected until October 2004; reporting therefore will not begin until the end of the 4th quarter 2004/05. Work progressing.

Indicator 2: Safe Driver – to be reported at six-monthly intervals. Baseline (April – Sep 2003/04) indicative figures for numbers of lift truck drivers attending various training courses established.

Indicator 3: Safe Vehicle – to be reported annually

Indicator 4: Raising Awareness of the Risk: Numbers of workplace transport guidance leaflets issued and sold; Numbers of calls to the Infoline on the topic; Numbers of hits on the workplace transport webpage. No new guidance issued. Sales of guidance selected for monitoring have been fairly consistent over the 2 quarters, although numbers slightly down 2nd quarter. Telephone and written enquiries significantly up on the previous quarter. Dedicated webpage went live on 1 October 2003. Number using dedicated advice centre provided by FTA: Implementation now end of October 2003.

Indicator 5: Field force activity: 11 916 proactive inspections (exceeding plans). No of times "4" scored (limited or no compliance): 487: Notices issued 549

SUMMARY:

- BASELINE ESTABLISHED FOR LIFT TRUCK DRIVER TRAINING

- SALES OF GUIDANCE SLIGHTLY DOWN ON 1ST QUARTER BUT SALES CONSISTENT; GUIDANCE IS OLD, INDICATING AWARENESS RAISING IS REACHING NEW STAKEHOLDERS; INCREASE IN 'PHONE AND WRITTEN ENQUIRIES
- 11 916 PROACTIVE INSPECTIONS (PLANS EXCEEDED). LOW SCORING PREMISES: 487: NOTICES ISSUED: 549

MSD

Indicator 1: Field Interventions (Risk control indicators) – Baseline: 57% of duty holders were complying or going beyond; 15% of dutyholders were poor performers. Comparisons between Q1 2003/04 and 02-03 Q1 data show a statistically significant increase in the number of workplaces with a score of 6 or lower: from 55.4% to 57.7%. **How many poor performers?**

Indicator 2: Field Interventions (Number of Improvement Notices on MSD issued). Baseline: **247 IN s** (baseline revised from last quarter: now using 2001/02 figures and not 1st quarter 2003/04 figures). 2002/03 : 331 IN s issued. 1st 6 months of 2003/04 : A comparative fall – 109 issued.

Indicator 3: RIDDOR manual handling accident figures. Since the indicator was proposed, it has become clear that the data is not easily accessible; officials are considering a new indicator.

Indicator 4: Hits on the manual handling assessment chart web page – information to be collected monthly, from September. 18,845 hits in September.

SUMMARY:

- A STATISTICALLY SIGNIFICANT INCREASE IN THE NUMBER OF WORKPLACES WITH A SCORE OF 6 OR LOWER (GOOD): FROM 55.4% to 57.7%.
- IMPROVEMENT NOTICES: BASELINE: 247 (2001/02). 331 (02/03). 1ST SIX MONTHS 2003/04: 109 (A FALL)
- 18, 845 HITS ON THE MAC WEBSITE

Stress

Indicator 1: Number of organisations officially piloting standards of good management practice, backed up by those extra that express an interest - Progress on track. 24 organisations continue to officially pilot draft management standards. A further 5 are piloting a question set for the Workplace survey. (Hits to the HSE Stress Web Pages increased fivefold over recent months following launch of management standards pilot.)

Indicator 2: Number of inspections where work-related stress is discussed with employers and/or employees. (Note Indicator amended to *Time allocated to inspection* in line with operational arrangements.) Data analysis indicates work-related stress discussed at 400+ contacts during Q1 2003/04 compared with 500+ in Q1 2002/03 supplementing earlier evidence of lack of confidence by operational staff. During Q2: 2.7 inspector years (provisional) were allocated to work-related stress issues compared with 1 inspector year in quarter 1 (reflecting efforts to increase levels of stress operational activity in Q2). Despite this increase, a potential year-end shortfall against plan is still expected and so a number of initiatives are being put in hand to address this shortfall.

Indicator 3: Workplace survey questions – will not report until mid-2004, and then baselines only. Project being developed.

SUMMARY:

- MANAGEMENT STANDARDS – ON TRACK
- OPERATIONAL ACTIVITY: INCREASE IN TIME ALLOCATED TO WORK-RELATED STRESS ISSUES IN Q2 COMPARED WITH Q1; INITIATIVES IN HAND TO ADDRESS POTENTIAL SHORTFALL OF YEAR-END OPERATIONAL PLANS

Slips and Trips

Indicator 1: Field interventions – The profile of Risk Control Indicator scores will take some time to build and comparisons at this stage may not be useful: there was a significant increase - from 57% to 64% *- between Qs 1 of this year and last year.

Indicator 2: Raising awareness: Increase in number of Improvement Notices issued during intervention programme (notices/1000 contacts). The rate of Notices served increased to 5.7 instances of notice serving per 1000 inspections compared to a baseline of 4.5/1000. The average for the first two quarters is 4.4/1000.

Indicator 3: Designing out slips and trips – reporting from mid-2004

**For RCI A (floor contamination) the proportion of scores in the worst category fell from 1.2% to 0.6%. The average score, at 2.02, was unchanged.*

For RCI B (suitable floors and footwear) the proportion in the worst two categories rose from 12.5 to 14.9% and the average score rose from 1.95 to 1.98.

For RCI C (prevention of trips) the proportion in the worst category fell from 1.9% to 0.9%. The average score was virtually unchanged at 2.14.

SUMMARY:

- FIELD INTERVENTIONS: SIGNIFICANT INCREASE – FROM 57% to 64% - BETWEEN Qs 1 OF 2003/04 AND 2002/03.
- BASELINE: 4.5/1000 INSPECTIONS. Q2: 5.7. AVERAGE FOR 1ST 2 QUARTERS: 4.4/1000.