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## HEALTH AND SAFETY COMMISSION

### The Health Agenda Action following HSC Residential

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Cleared by Jonathan Rees on 12.07.2006

#### Issue

1. HSE action to progress the Health Agenda in light of discussion at the HSC Edinburgh residential meeting.

#### Timing

2. Routine.

#### Recommendation

3. For information.

#### Background

4. At the HSC Residential on 7<sup>th</sup> June the Commission considered where we are on the new health agenda, and gave a strategic steer on how we should position ourselves in the future. This note describes work planned by HSE and others to take forward actions proposed during that discussion.

#### Argument

5. In discussion you asked that we follow the evidence that we have, and evaluate what we (HSC/E) do, taking full account of experience in Scotland and Wales; and, in particular, pull together more on the business benefits of the Health and Work Agenda, where practicable, in collaboration with the DTI. Initially, we will summarise the existing evidence on the relationships between health and work, and the effectiveness of interventions by Government and others. This summary will draw on the academic review commissioned by DWP which will look specifically at evidence that exists that might help us answer the question, "Is work good for you?" This should provide good material for the Commission's conference in October which will take as its theme the health/good jobs agenda.
6. You also suggested that there was more that we could do to influence others, across Whitehall in particular, and that Commissioners had a key role here. We will work up key messages and a communications plan designed to get across what we are seeking to achieve and why others, especially in Government, should support our effort. In

communicating with Treasury and DTI we will focus on the broader benefits to the economy as well as efficient and effective delivery of public services.

7. In addition, you advised that we should pay careful attention to our limited resources and the way in which allocations were prioritised to ensure optimum outcomes, and minimal deflection from existing priorities. Segmentation could be the best approach. This is also a theme arising from the Fundamental Review. We will take this into account in our planning where we will continue to prioritise those key areas where HSE can make the greatest difference.
8. Finally, you offered a steer on how we might approach issues around public perception of our role as a regulator. To this end we will continue to ensure that our focus is related to work and the effective management of risk, whilst taking the opportunity to develop our own message in the context of the broader health agenda, especially in relation to groups that we otherwise find hard to engage.
9. The annex to this paper sets out actions planned under five headings:
  - Evidence base
  - Influencing others
  - Resources and priorities
  - Public perception/reputation
  - Segmentation
10. We will make oral presentations on our successes to date and plans (e.g. the Stress Management Standards, our Programmes on MSD, on Diseases Reduction and in the Public Services) beginning in September.

### **Consultation**

11. Within HSE.

### **Presentation**

12. This will be presented internally as part of the changes we are making to effect better coordination of delivery within HSE, and with external partners. Although we do not plan any specific external communication activity, this can form part of positive messages to DWP and DH Ministers as appropriate.

### **Financial/Resource Implications for HSE**

13. Demands on resources arising directly from this will be met from within existing allocations.

### **Environmental Implications**

14. N/A

### **Action**

15. To note.

Issue	Actions	How	When
<b>Evidence base</b>			
<b>Evaluation and general evidence of impact of interventions</b>	Summarise existing evidence for HSC + build on that in light of HSC discussion	Fundamental Review Delivery theme proposal for working up the evidence base.	October 2006
<b>Health and Work</b>	Review evidence	DWP-commissioned research project	Publication planned for Autumn 2006
<b>Experience in Scotland and Wales</b>	Learn from S&W experience	Formal and informal evaluation (qualitative and quantitative as appropriate) & sharing best practice	Ongoing
<b>Business benefits</b>	Explore potential for more work with DTI	Exploratory meeting of analysts Meeting with DTI Director General	Summer 2006
<b>Influencing others</b>			
<b>DWP</b>	Communicate clearly what we desire	Develop messages for HWWB Executive	Ongoing
	Work with DWP colleagues to ensure HWWB adequately covered in the Departmental 5-year Strategy	Engagement with DWP Strategy Team and Health and Work Division	Summer 2006
<b>DH</b>	Continue to work with DH on HWWB agenda, stressing HSC/E "needs"	Ensure that "Healthy Workplaces" workstream adequately covers prevention	Ongoing
<b>Ministers &amp; Whitehall more generally</b>	HSC engagement with Ministers and others to promote H&S aspects of the HWWB agenda	Use opportunities that arise, e.g. through Ministerial Task Force and HWWB Joint Ministerial Group	Ongoing
<b>Local Authorities</b>	Discussion about getting H&S and HWWB generally appropriately covered in Local Area Agreements	Engagement with DCLG and DWP colleagues	Ongoing
<b>Aim to prioritise work with partners who have funds</b>	Ensure key factor in discussions about future work	Discuss resource issues in developing new partnerships	Ongoing
<b>Resources and Priorities</b>			
<b>Allocation from existing budgets (a lot can be achieved from relatively little resource)</b>	Provide HSC with detail of current – pie chart	Presentation	At September meeting

<b>Workplace Health Connect</b>	Continue to promote and adjust service	Stakeholders Event : 18 July	Ongoing
<b>Risk of deflection from existing priorities</b>	Retain focus on currently agreed strategic priorities	Do not feel obliged to fill gaps	Ongoing
<b>Public Perception/Reputation</b>			
<b>Risk of diminishing authoritative HSE brand</b>	Focus on the workplace, and manage the risks	Ensure that messages are clear, and monitor impact on stakeholder perception, e.g. at HSC Stakeholder Conference	Ongoing
<b>Opportunity to develop and promote H&amp;S in hard to reach groups</b>	Seize the opportunities provided by HWWB interaction with groups that we might not otherwise engage, e.g. SMEs, BME employers and employees	Continue to develop relevant initiatives, e.g. WHC	Ongoing
<b>Segmentation</b>			
<b>Focus on key areas where HSE can make a big difference</b>	HSE planning	Identify key targets and adapt plans accordingly, e.g. <ul style="list-style-type: none"> <li>- Public Sector</li> <li>- Large Organisations</li> <li>- SMEs</li> <li>- Sectors</li> </ul>	Ongoing