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HEALTH AND SAFETY EXECUTIVE

The HSE Board

Monthly Health & Safety Report - November 2005

A Paper by Tim Beaumont

Advisor(s): Health & Safety Unit, PARIS & Management Information

Cleared by Marcia Davies for Justin McCracken on 26 October 2005

Issue

1. Report on current significant issues for HSE's management of health and safety including incidents, sickness absence statistics, performance against targets and request for support and action. Also included is a brief review of performance against targets at half-year stage.
2. There are two other health and safety papers before the Board this month: stress management (Paper B/05/052) and the Exchange briefing feedback.

Timing

3. For discussion at this meeting

Recommendation

4. That the Board
 - Notes encouraging performance at mid year and progress against targets and agrees to pass on praise to all staff for helping to bring about improvements, particularly in the management of DSE and manual handling;
 - Supports the on-going work to improve fire risk assessments in the estate; and
 - Agrees the contents of the one page summary of the Corporate plan to be distributed to all staff, as requested at the last Board meeting.

Argument

5. a) Progress against monthly targets

See Annex 1. Reported incidents & cases of ill health (at 21 October 2005) remain encouragingly below targets. In particular the numbers of DSE IH1s are well below the target.

Unfortunately August and September saw an increase in the rolling sickness absence rates of 2%. Early indications are that this was not due to an increase in long-term absences.

b) Half year review compared to performance in 2004/05

See Annex 2. There are some very encouraging trends. It appears that in several of the key risk areas (RIDDOR, DSE & manual handling) there has been a substantial reduction in incidents compared to last year. The Board is asked to pass on its praise to all staff for this reduction and to encourage staff to maintain the good work throughout the rest of the year. The suggested mechanism for this would be a note in e-express and an article in the health and safety supplement of Express.

The increase in reports of verbal aggression and abuse can be seen in some respects as an encouraging trend in that it shows that staff are more willing to report events which intimidate and distress them. It can also be linked with an external message that HSE does not tolerate any abuse or intimidation of its staff and takes such incidents very seriously, involving the police if necessary. However it may also reflect changes in societal behaviour. More work is being done on this by the Operations Group health and safety committee.

c) Update on work on fire risk assessments

The new (provisional) fire risk assessment for Rose Court had just been received from the new firm of consulting fire engineers, Buro Happold Ltd. It is a great improvement on the earlier version. However, there were a number of issues that need to be explicitly covered and recorded and these will be fed back to the company to incorporate in the final version. The intention is that the Rose Court assessment will form a template for the subsequent programme of assessments for the rest of the estate.

A note summarising progress will be prepared for Rose Court staff, as part of the management response to the specific incident.

At the November 2005 CHSC meeting, BSD hope to provide a timetable for carrying out the assessments at the other offices. While the hope is to have these done for the end of the work year the quality of the process is seen as the most important thing. Given that the company's services are in demand, we may need, if necessary, to be prepared to compromise a little on time in order to secure a thorough job. The programme will obviously be prioritised on the basis of risk.

d) Summary of Corporate Plan for distribution to staff

Last month's Board meeting requested that a summary of the Corporate Plan be prepared for staff to improve their understanding of its contents. The summary is found at Annex 3. If the Board agrees that this summary is fit for purpose HSU will liaise with Internal Communications about the best format and mechanism to get it to all staff. It should be presented as a quick response to an issue raised across HSE at the Exchange briefing meetings.

Future health & safety Board papers

December 2005	Lone working Board report to include notes from November's CHSC & OGHSC meetings
January 2006	Governance review

Contact

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Annex 1 - Progress against targets at 20 October 2005

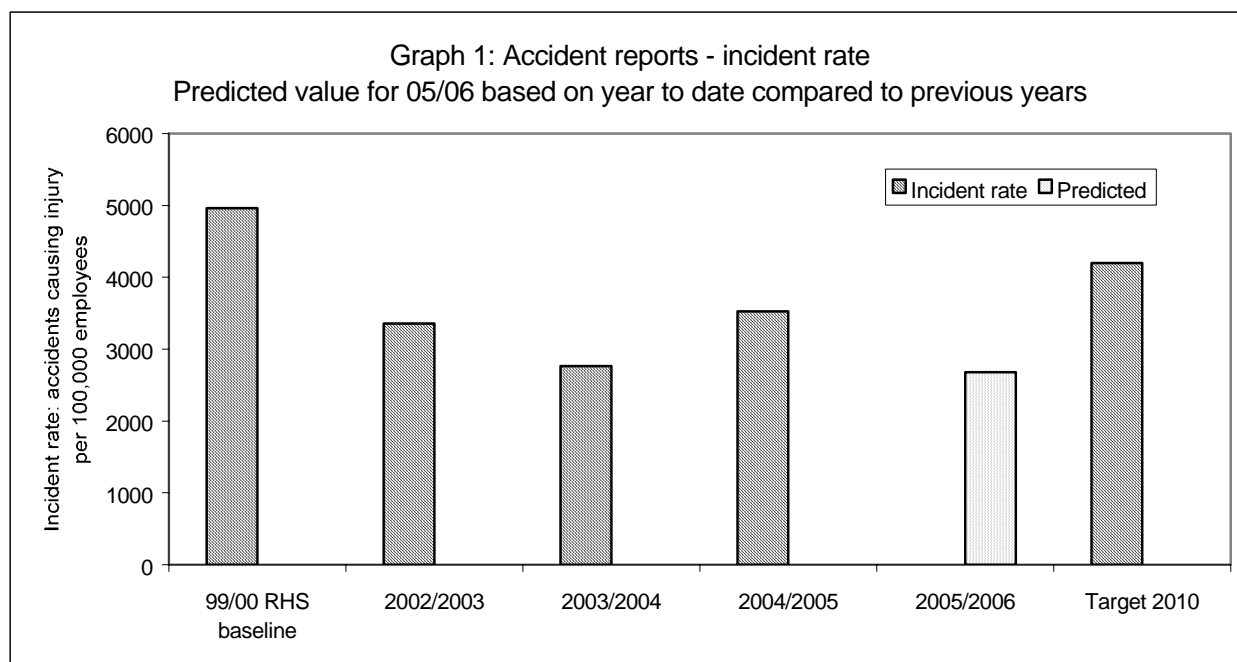
There have been 30 incidents/ill health reports for the period 23 September – 20 October.

Category	Actual number reported since 1/4/05	Number required to fail target	Target for 2005/06
RIDDOR reports	5 ^a	5	<10
DSE/IH1 reports	15	33	<57
Slips/trips causing injury	22 ^b	27	<47
Near misses	91		

We are still on course to achieve two of our targets. The only target where there is some doubt is the RIDDOR reports. This appears to be proceeding just at the level where failure is possible, so the figure needs to be kept under close observation. One RIDDOR reportable incident occurred during October. The incident relates to horseplay and is subject to a disciplinary investigation. It has no relevance to other health and safety matters and for this reason will not be discussed in this report.

The result for DSE IH1s is very encouraging, showing a falling rate.

The accident incident rate (see Graph 1) has fallen from 2970 last month to 2679, which is still below the RHS target and the rate for 2004/05.

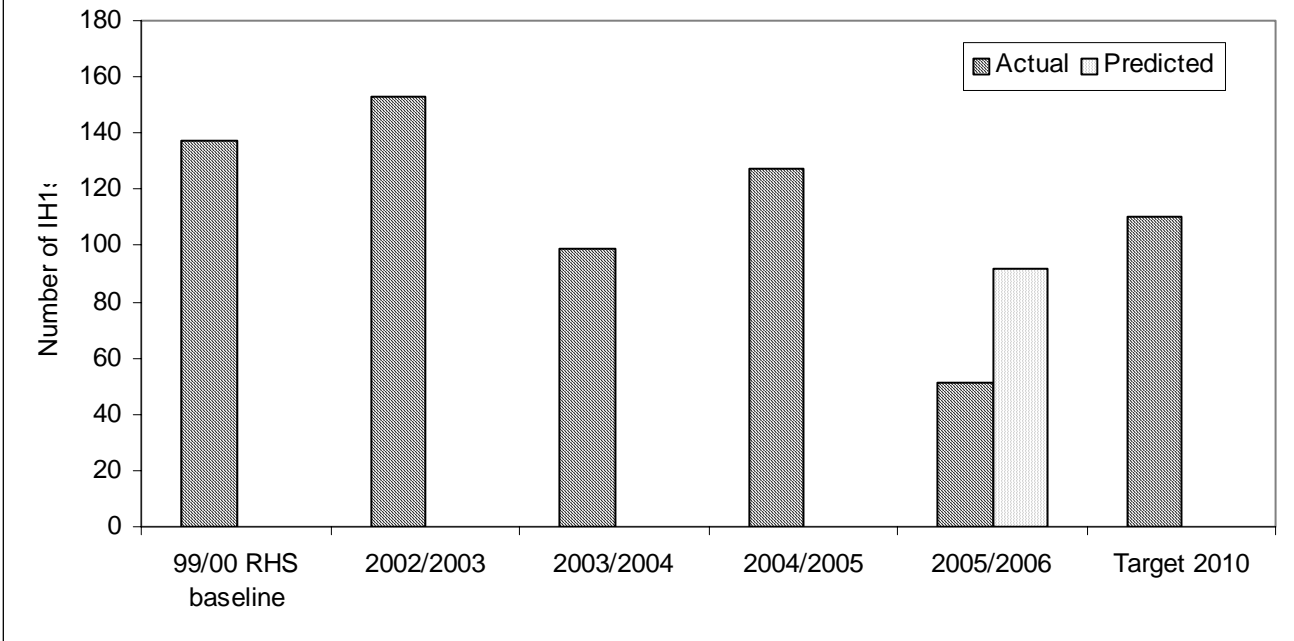


There have been 51 IH1s received in the year to date. This gives a prediction of 92 for the year as a whole, which remains below the 2010 target and the 2004/05 level (see Graph 2).

^a : There was one other event not counted against the target: the water contamination incident at HSL. This falls into the category of affecting our staff but not being counted against our 2005/06 RIDDOR target.

^b : Of these 7 occurred off HSE premises

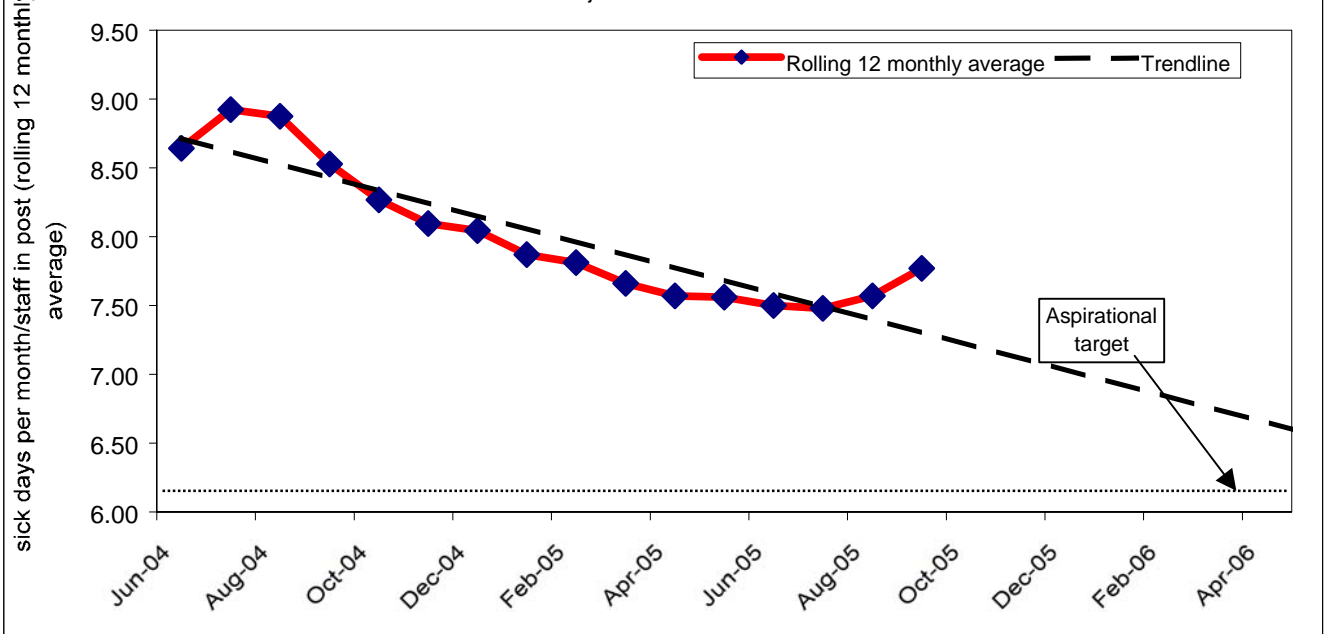
Graph 2: Ill health reports: Year to date compared to previous years



For the first time in a year the rolling month indicator has risen in August and September. Both months have been added in this report due to difficulties in obtaining the information from the e-payfact system and correlating them with the PARIS system last month. The increase over the two months is 0.2 (2.7%). Initial inspection of the data suggests that this is down to an increase in short-term rather than long-term absences. The increase means that we are set to hit the target of 6.2 in the Autumn of 2006. Monitoring of the situation will continue.

Graph 3: Current sickness absence in HSE staff up to and including July 05

Projected trend shown



Annex 2 – Half year report: comparison with 2004/05

Category	April – September 2005	April - September 2004
RIDDOR reports	4	11
DSE/IH1 reports	12	34
Slips/trips causing injury	22	20
Manual handling injuries	7	19
Ill health due to stress	21	19
RTA causing injury	2	2
Verbal abuse/threats	11	4

The above table covers key health and safety issues that we continue to monitor.

Aside from the comments already made about RIDDOR & DSE, it is encouraging to see such a reduction in incidents due to manual handling, following our campaign on the subject. It appears that action agreed by the Board and the CHSC has produced reduction in the figures.

Slips & trips, stress and RTAs are at (more or less) the same level as last year. In all of these areas work is underway to try and improve performance. The work on near miss reporting that the Board noted last month should help with reducing the number of slips and trips causing injury. This month's paper on the stress risk assessment gives recommendations on addressing the key risks relating to this subject in HSE. A sub-group of the Corporate Health and Safety Committee has been looking at ways to reduce work related road risk. It is due to make its final report at the committee meeting in November.

Reports of verbal abuse have increased since this time last year, and a further 8 have been received since the end of September. The increase may be in part due to heightened awareness to report all such incidents. A breakdown of the 19 received so far this year will be included in the Board Paper on lone working next month.

Annex 3 Summary of HSE Corporate Plan for Health and Safety 2005/06

HSE, in consultation with the Trades Unions, has identified **four priority areas**. These areas reflect the current key risks for HSE to manage and the proposals endorsed by the Board in Board Paper HSE/04/026 for improvements in HSE's health and safety.

PRIORITY A: IMPROVING HEALTH & SAFETY MANAGEMENT IN HSE: The development of **fit for purpose systems** and a strong **compliance** culture across the organisation.

What we plan to do:

- *Board members to attend appropriate Occ Health & Safety management course by 12/05.*
- *Review of role of HSU/HSA to take place by 12/05.*
- *Health and safety to be included in key competencies for managers by end of year.*
- *Review of current health and safety instructions to be completed by 07/05.*
- *Revision of priority health and safety supplements to be completed by 03/06.*
- *New 'Your health and safety' Intranet site online by 12/05.*
- *End duplication of instructions across Directorates by 03/06.*

PRIORITY B: TARGETING THE MAIN CAUSES OF HARM IN HSE: Improving HSE's performance with regards to **DSE** related problems, **manual handling** related injuries, **slip & trip** accidents and **work-related stress**.

What we plan to do:

- *To reduce DSE related ill health reports by 10% on 2004/05 figures.*
- *Ensure that REFIT/Aqumen deliver improvements identified by DSE assessments within time limits dictated by service level agreements*
- *To reduce the risk to health where weights greater than 25Kg are being lifted.*
- *Site committees to identify and action one area where manual handling can either be eliminated or the risk of harm reduced.*
- *All findings of slip/trip risk assessments to have been implemented by 12/05.*
- *To reduce slips and trips by 10% on 2004/2005 figures.*
- *Keep to the deadlines set as part of the roll out of the stress management targets in HSE.*
- *Develop an appropriate performance measure for stress related ill health based on absence data.*
- *For each Directorate/division (D/d) to update their stress action plan in the light of the findings of the HSE's stress survey tool.*

PRIORITY C: TARGETING HIGH CONSEQUENCE RISKS: Ensuring that **work-related road risks** and **lone working** risks are properly managed.

What we plan to do:

- *Assess compliance with HSE's guidance on fleet management by 05/05.*
- *Review the efficacy of Defensive Driving Training by 09/05.*
- *Publicise good practise with regards to driving throughout the work*
- *Monitor uptake of Cybertrak phones*

PRIORITY D: IMPROVING OUR ABILITY TO MONITOR HEALTH AND SAFETY PERFORMANCE.

Identifying leading indicators to complement existing Board targets and take steps to ensure that targets are met.

OTHER HEADLINE TARGET - *To reduce the number of RIDDOR reports to single figures.*

For the full plan see <http://www.hse.gov.uk/aboutus/plans/hseplans/plan0506.pdf>