

Health and Safety Executive Board Paper		HSE/07/106	
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HEALTH AND SAFETY EXECUTIVE

The HSE Board

Health & safety - Monthly incident and absence statistics - October 2007

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Advisor(s): HR Service Centre - PIR team

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Issue

1. Monthly health and safety statistics for HSE

Timing

2. For review at the meeting.

Recommendation

3. That the Board notes the progress against targets and the absence of any sign that sickness absence is falling. Also, individual Board members are asked to take any action appropriate in their own areas of responsibility.

Argument

4. See Annex 1 for details of incidents for the period up to 18 September and sickness absence for the period up to 14 September 2007. Progress against targets remains good for the year to date, albeit with some caveats. Annex 2 gives details of sickness absence performance. Comments on specific issues of are found underneath the relevant chart. Overall there has been no indication of a strong downward movement in sickness absence levels required to meet our targets.

Annex 1 – Update on health & safety performance – Provisional figures for 2007/08

Performance against Board Targets for 2007/08 as of 19 September 2007

A total of 22 incidents were recorded on e-HR for the period 18 August to 19 September 2007 with 10 near misses/property damage. There were no RIDDOR reportable incidents. The break down is as follows:

Category	Actual number reported since 1/4/06	Number required to exceed target	Target for 2007/08
All incidents causing injury	32	64	<137
All work related ill health	31	47	<101
DSE ill health	15	19	<41
Slips/trips causing injury	9	16	<35

Of the near misses three were property damage related to a road traffic accident and three were cases of verbal abuse over the telephone.

One near miss related to a problem with the pressure levels in HSLs containment level three laboratory. No staff member was exposed to hazardous substances. The fault was traced to a problem with the lab's differential pressure switch, which was replaced.

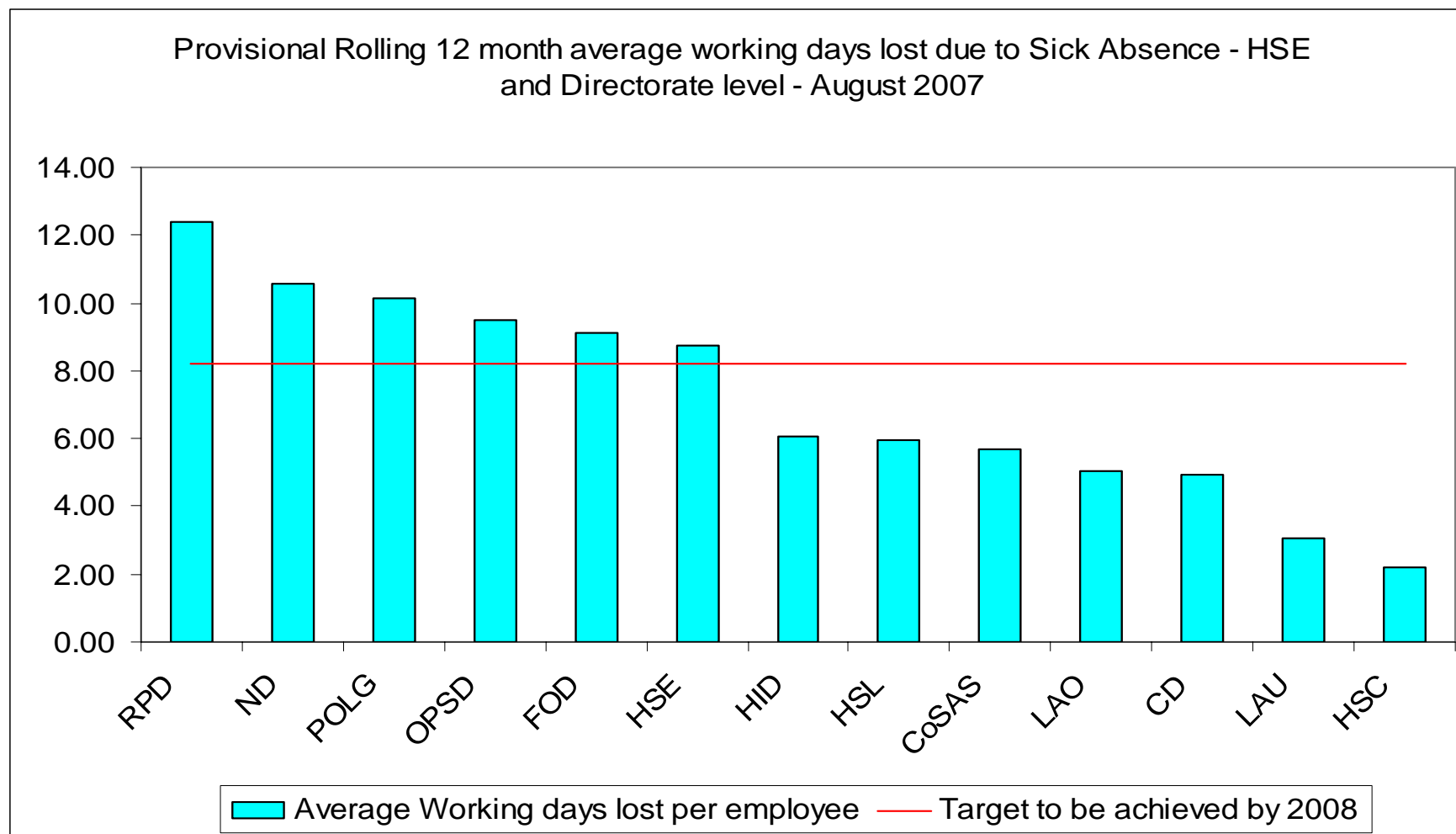
Finally one near miss was due to an inspector's gas monitor alarm being activated during a visit to a tunnel. The alarm indicated an oxygen deficient atmosphere. The activation of the alarm allowed the inspector to immediately evacuate the area. It was a useful example of HSE's confined spaces safety policy working and preventing harm occurring to a staff member.

Overall the low levels of reporting continue. The DCE Board champion for health and safety sent a message to all site safety coordinators to find out if the new reporting system may be responsible for the low levels. The returns from this confirmed that most of the people now responsible for entering the reports into e-HR believed that there had been a drop in reported incident numbers. Concerns were raised that the new reporting system may increase the chances of inputting error due to a lack of training and experience with the new system. These concerns are being followed up. HRD will continue to work with the regions to ensure that incident reports are reliable.

Some other reasons for the fall in incident numbers were suggested, including improved health & safety management and changes in the DSE referral process. One explanation may be the falling numbers of staff (now down to 3,585 whole time equivalent compared to 4,051 in March 2006 – a fall of 12% in 18 months). To correct for this incidents can be presented as rates per 100,000 staff. This approach will be adopted next month.

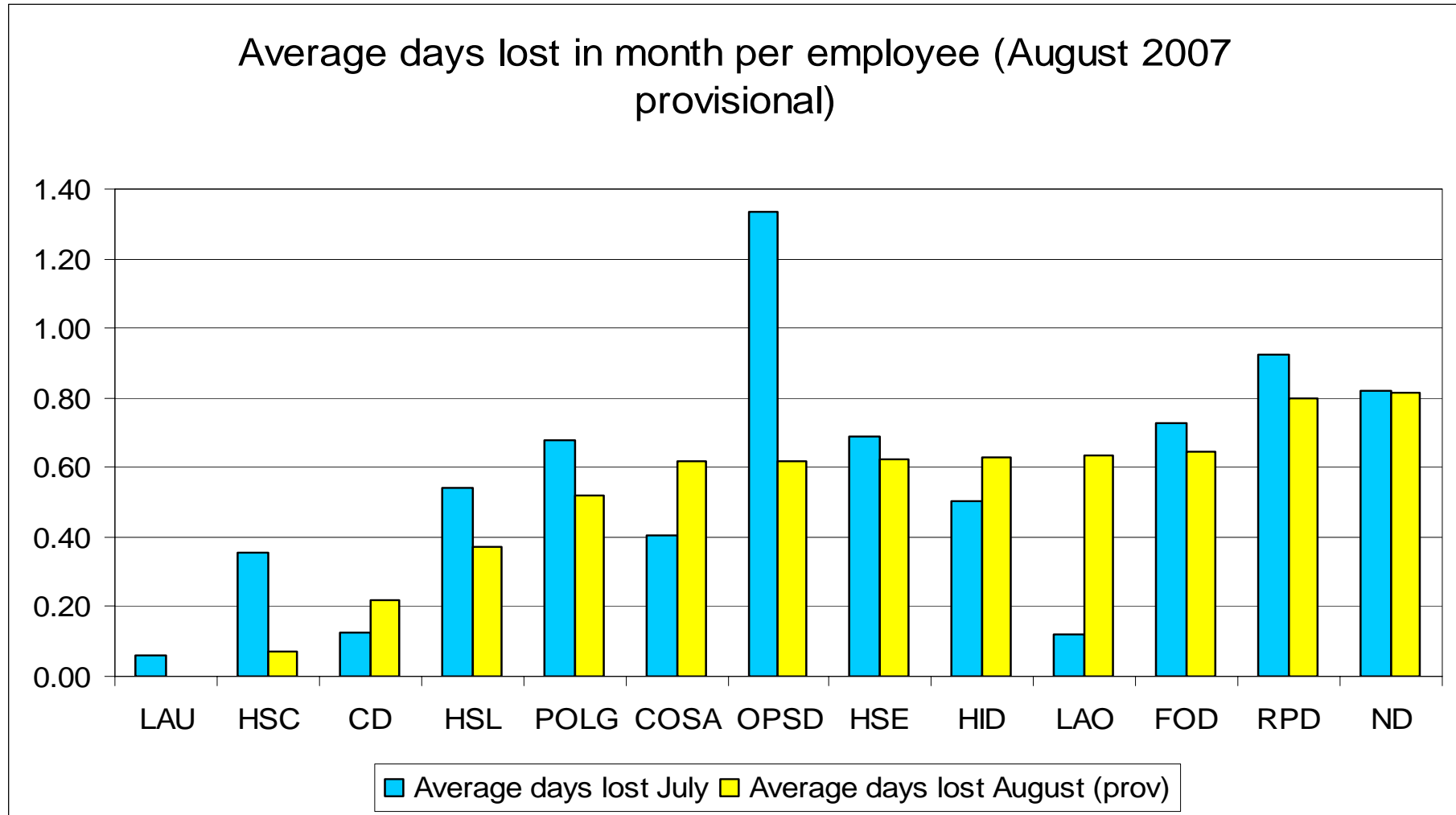
Annex 2 – Sickness absence report up to August 2007 (final month provisional as late reporting affects this slightly)

Graph 1



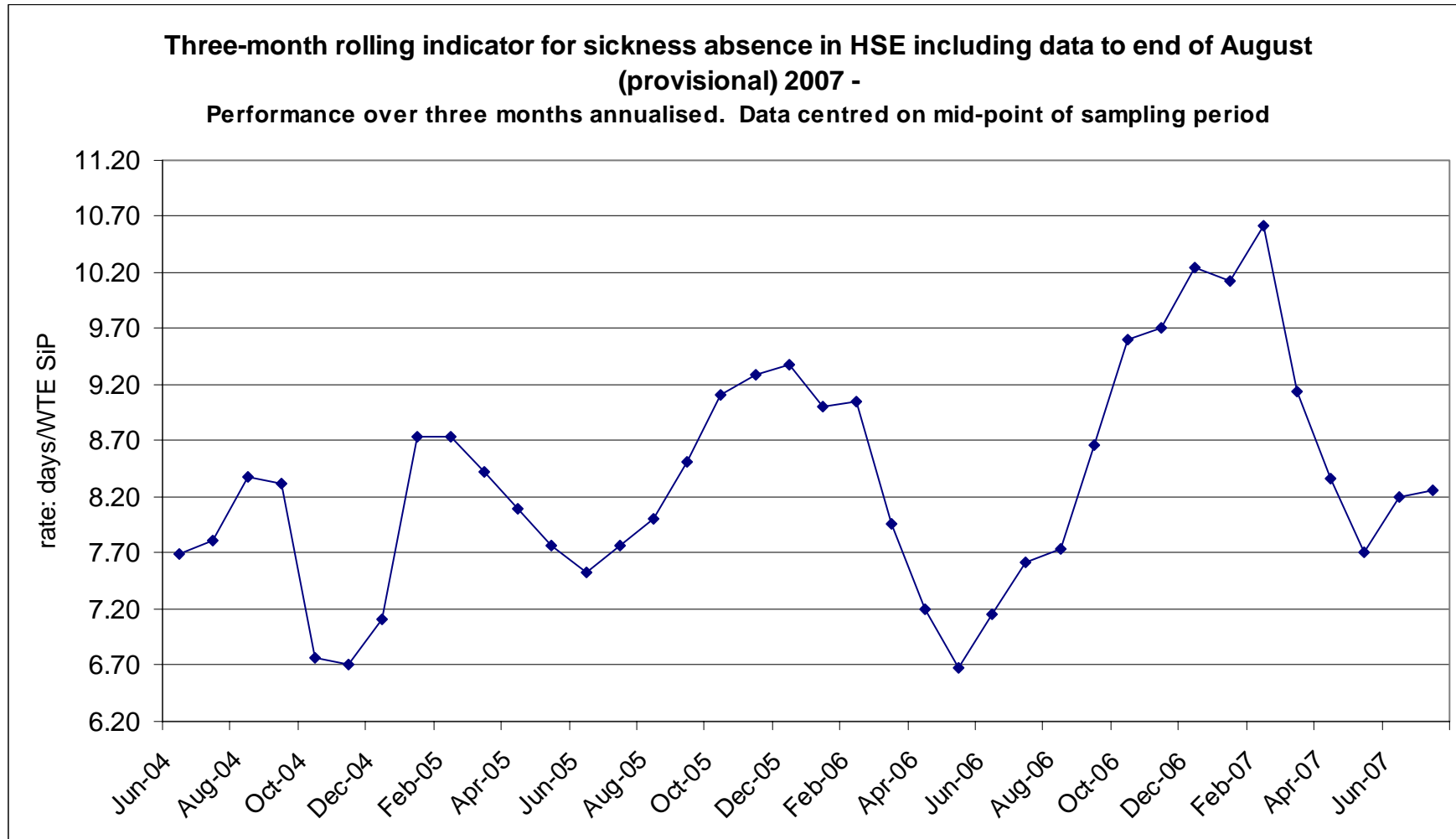
Commentary: This graph illustrates an historical 12-month rolling total average working days lost per employee, at Directorate level. The HSE overall level for the previous 12 months is above the target level for the end of the year. There has been no great movement on this chart compared to last month with Directorates likely to miss or hit the target remaining the same.
Source data: e-hr data extracted 14 September 2007

Graph 2



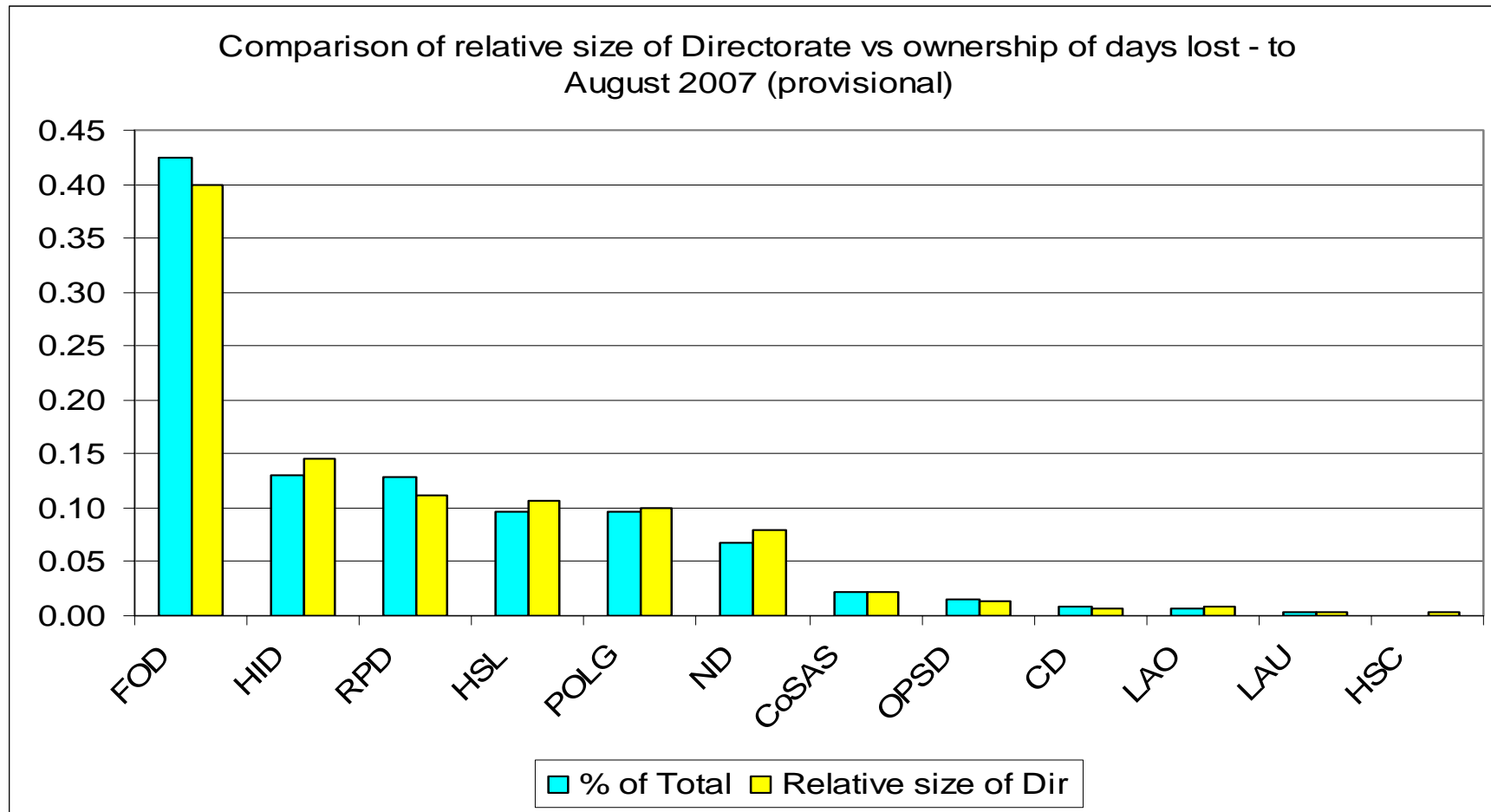
Commentary: Overall there was a slight fall for HSE from July to August. This is possibly due to falls in the rate in some of the Directorates with higher rates of absence (RPD, FOD & POLG)
Source data: e-hr data extracted 14 September 2007

Graph 3



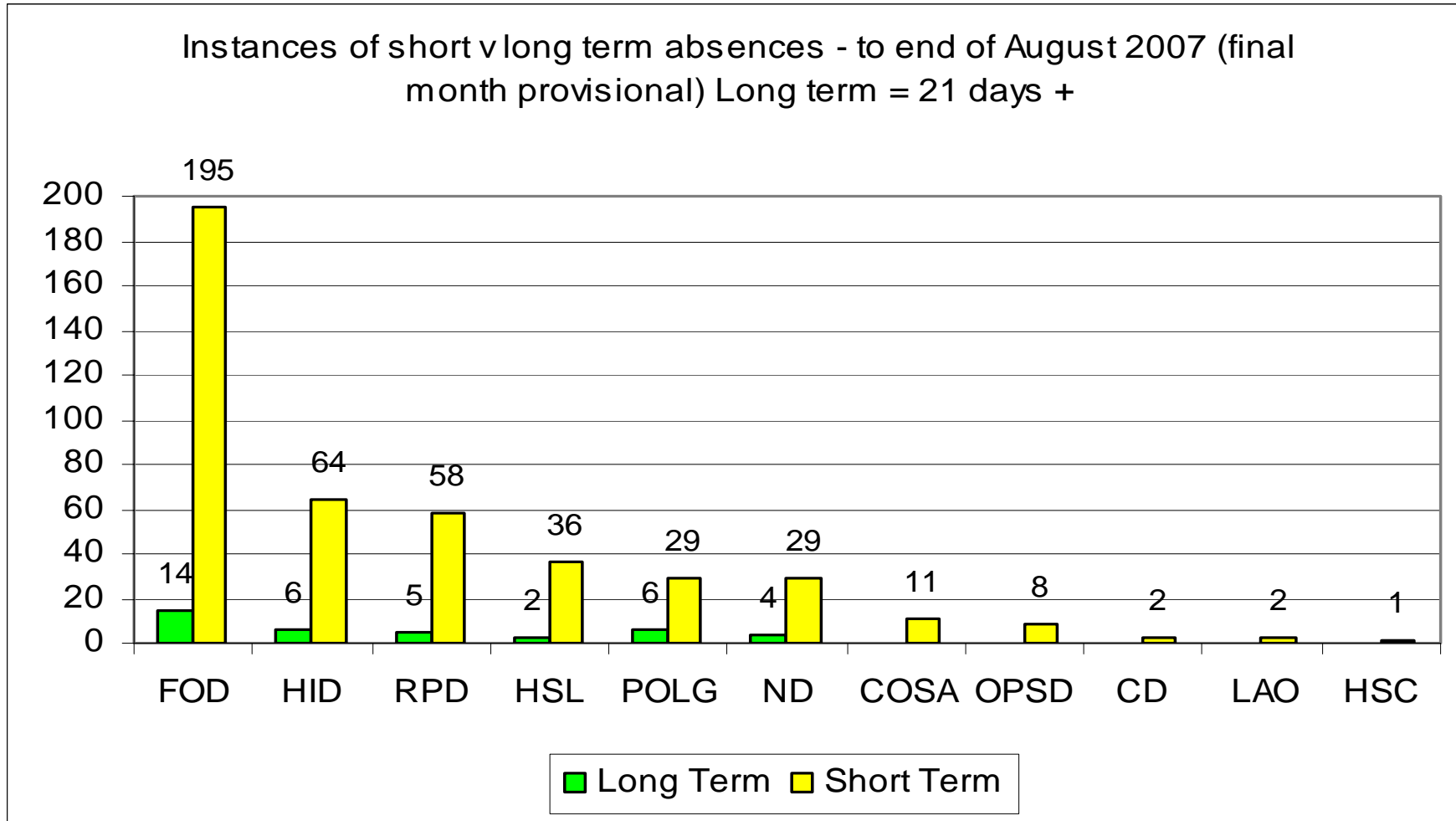
Commentary: The data continues to follow an annual cycle with a rise being seen in August. This was the case for 2006 and 2005. It is worth noting that the level this year is higher than the previous two years.
Source data: e-hr data extracted 14 September 2007

Graph 4



Commentary: There is little change in the overall picture.
Source data: e-hr data extracted 14 September 2007

Graph 5

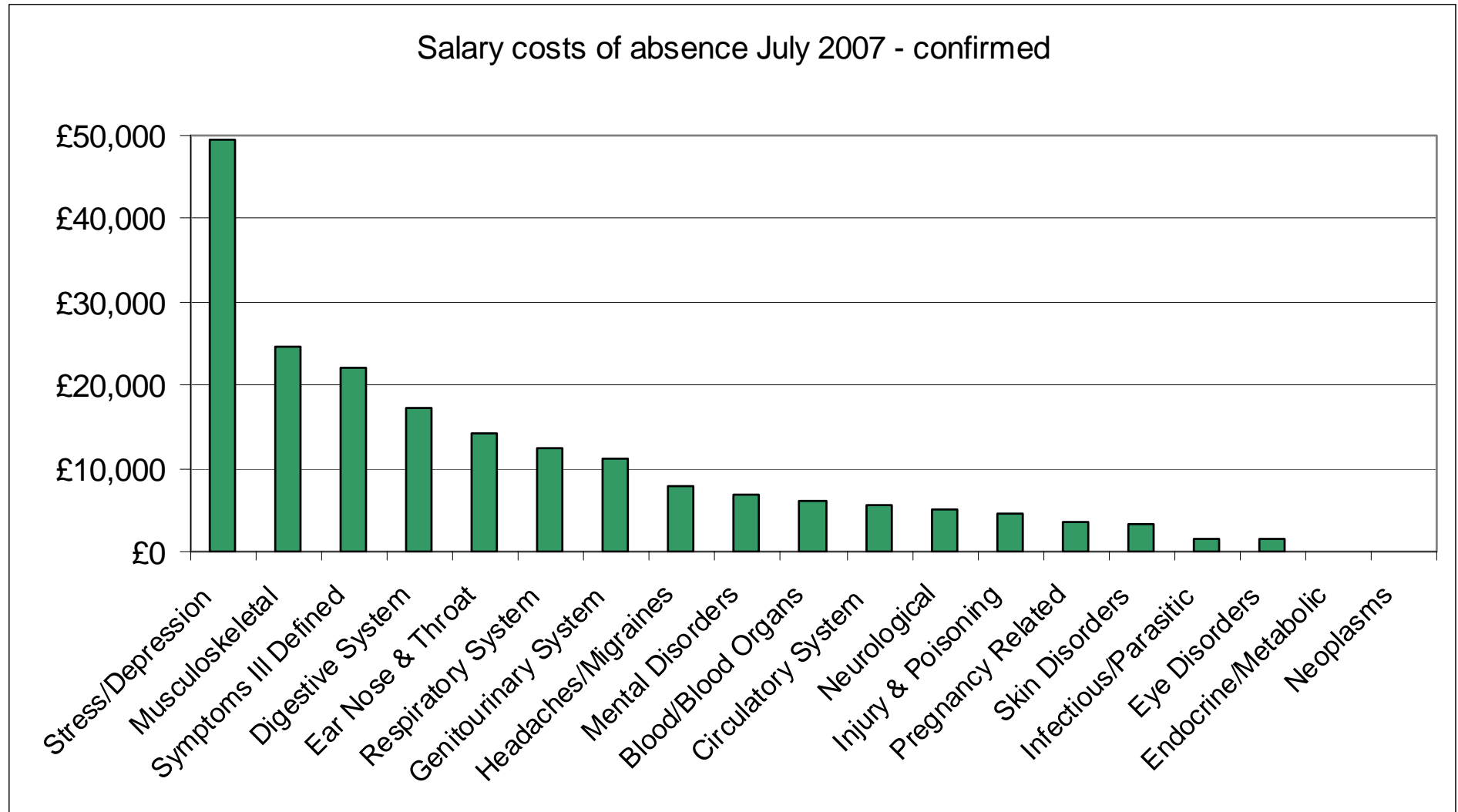


Commentary:

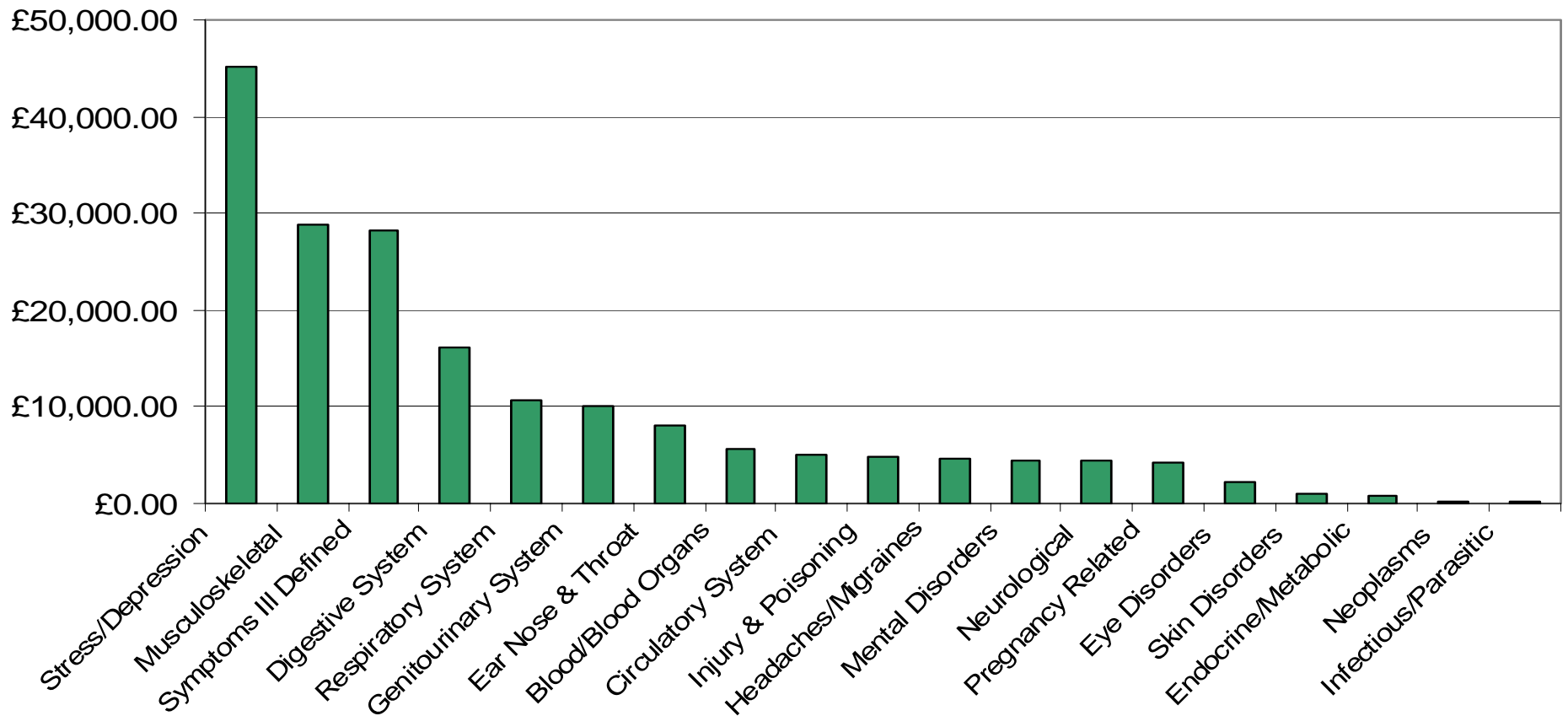
Compared to last month short term absence has fallen from 486 to 435, and long term has fallen from 42 to 37. This is mainly due to a fall of 5 in the number of long term absences in FOD

Source data: e-hr data extracted 14 September 2007

Graph 6



Salary costs of absence August 2007 - provisional



Commentary:

The calculation of cost for the organisation is direct salary costs only. They do not include allowances or the cost of covering absence. The two main reasons, stress/depression and musculoskeletal show an increase on the previous month, as does symptoms ill defined. Blood/blood organs now features in the top ten and neurological drops out.

Source data: E-HR 14 September 2007