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HEALTH AND SAFETY COMMISSION

CONSTRUCTION INDUSTRY ADVISORY COMMITTEE (CONIAC)

An outline and update on the work of Constructing Better Health (CBH)

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Summary

For information and discussion at CONIAC on 4 March 2008

This paper informs CONIAC of the development of Constructing Better Health national scheme for occupational health in the UK construction industry.

Issue

1. The management of occupational health (OH) in the UK construction industry.

Recommendation

2. That CONIAC notes the work of Constructing Better Health and raises any issues arising at its meeting on 4 March 2008.

Background

3. Constructing Better Health (see paper M1/2004/6 for background on CBH's origins) is a not-for-profit organization for the construction industry; working in partnership with the occupational health community to deliver solutions for the proactive management of construction specific work-related health, the aim of which is to improve the health of the industry workforce. CBH is focusing on five key areas:

- Setting Industry Standards for both work-related health issues and competency of occupational health provision to deliver health screening, delivering a definition of safety critical workers within the construction sector, and outlining fitness for work health checks.
- Building a construction specific knowledge portal, giving consistent advice, guidance and support in the management of health-related risks.
- Centralising the collection of work-related health data to ensure the future improvement of workforce health based on valid and reliable data and the provision of a 'benchmark' for industry.
- The transmission of data to enable employers to manage work-related health risks.
- A referral route through to specialists in the field of return to work and rehabilitation.

4. Benefits of Constructing Better Health include:

- Establishing fundamental commonality through the introduction of Industry Standards, including competency standards for the delivery of occupational health services.
- Enabling industry to identify and therefore understand work-related ill health and ensure a proactive approach in managing workforce health, including health surveillance and rehabilitation, through the provision of tools for employers to reduce work-related ill health through prevention, control and management thereby reducing in the longer term the number of working days lost through ill health.
- Raising individuals' awareness of health-related issues through education toolkits and health promotion.
- A more effective method of transmitting and communicating of work-related health information, enabling decisions affecting workers' health to be taken quickly, both at local and national level.
- Providing qualitative data for future research and development of a healthier working environment.

- Overall improvement to the risk profile of construction activity via reduced work-related ill health.

Current position

5. The Constructing Better Health National Scheme availability is planned for Spring/Summer 2008. Start up phase plans are focused on large and medium enterprises which can effect a top down leadership role; however, as a market sector they constitute a small percentage of the total number of construction employers. For the future a much greater market exists within the smaller companies, the self-employed sectors and a more holistic approach to workers' health. Constructing Better Health will implement the scheme across all sectors of the industry through a planned marketing strategy and campaign.
6. The construction industry Standards address the consistency of occupational health and work-related health across the industry and, for the first time, define fit for task (FFT) for safety critical workers, which is seen as a major step forward for the industry. The Standards demonstrate the minimum legal requirements for health and safety, broken down by trade and task. More importantly they address the key issue of OH competency for working within the construction industry. There is a shortage of OH provision in the UK, including lack of construction specific knowledge and understanding. The Standards also address this. The following documents provided much more detailed information on the Standards t: www.fitbuilder.com/OHSPStandards2.pdf, [www.fitbuilder.com/matrix\\$20final.pdf](http://www.fitbuilder.com/matrix$20final.pdf), and www.fitbuilder.com/OHSPstandards1.pdf.
7. The website currently exists in a basic format, the Standards are published on the site, but it is being further developed and will include all products and services CBH are offering. It will also give site managers and employers FFT and health surveillance (HS) outcomes for individuals in the industry.
8. The contact centre has been set up to offer impartial advice, with professional OH advice available. Site managers and employers can also get access to FFT and HS outcomes via the contact centre.
9. The industry database will allow us to manage work-related ill health data and provide the industry with meaningful statistics, look at trend analysis and will

start to be able to proactively manage and identify possible work-related health issues earlier than currently able to do. The health outcomes on the database will allow the CSCS Smartcard, when available, to be updated in real time. This transmission of FFT and HS outcome information is key for onsite management of work-related health issues.

Action

10. Trevor Walker will give a presentation to CONIAC at its meeting on 4 March 2008 and will be available to answer Members' questions in relation to the matters described in this paper.