

Health and Safety Executive Board Paper		HSE/08/06	
Meeting Date:	24 th April 2008	FOI Status:	Fully Open
Type of Paper:	Above the line	Exemptions:	None
Trim reference:			
Framework for bodies established under the governance of the HSE Board			

The purpose of this paper

1. To consider a framework which sets out a model of the bodies which the HSE Board may establish to support HSE's work, and the principles applying to them. (Sub-committees of the HSE Board itself are not considered in this context.) The HSE Board are therefore being asked to agree a framework to govern the reconstitution of existing, or establishment of, new bodies it wishes to sponsor.

Background

2. The nature and extent of committees set up to provide advice to HSC/E has evolved over time. The timing of the merger of HSC/E provides an excellent opportunity to review the existing range of structures and to propose a framework for the new Executive.

3. HSC was committed – from its establishing legislation onwards - to seeking the views of its stakeholders when developing policy advice to Ministers – and found it productive to do so at meetings where a range of different viewpoints could be expressed and debated. As time passed, HSC/E saw the benefit in formalising those groupings as standing bodies and extending membership of them to others with a contribution to make. Such groupings usually had a sectoral or industry focus – to allow coherent and manageable agendas, and continuity. HSC/E also came to appreciate that such groups could be used as a stimulus to action aimed at securing better health and safety outcomes – not least because they included both dutyholder and worker representatives.

4. HSC further recognised the need for external advice (including technical expertise) on topics such as toxic substances. Some of the topic groups created mirrored HSC's own tripartite structure. In other cases, often in partnership with Government Departments, committees have been created to provide independent scientific advice eg on GMOs. Members of these are appointed solely for the expertise they bring, in line with the guidelines for such committees issued by the Government's Chief Scientific Adviser.

5. The generic title of 'advisory committee' has been applied to most standing bodies created by the Commission, without generally distinguishing between their different roles.

6. While many "advisory committees" remain in place, recent years have seen a range of adjustments to this model. A rolling programme of review and reconstitution has changed the focus and membership of some continuing committees. A number of industry committees have been wound up, sometimes being replaced by stakeholder fora serviced by HSE staff but with no formal link to HSC. Some of these groups have

kept the name 'advisory committee'. The Commission agreed to stand down at least one topic committee (on dangerous substances).

7. The formal link from advisory committees to HSC has allowed them to put their views directly to the Commission. However, in recent years, few committees have had significant contact, though their views have been carefully reported by HSE staff in relevant papers presented to HSC meetings.

8. To complete the picture, as well as managing some of the groups formerly linked to HSC, HSE has established a range of stakeholder/expert groups for specific purposes. These have often been time bound e.g. the Delivery Boards associated with the Fit3 Strategic Programme.

Discussion

9. The HSC/E merger provides the opportunity for the Board to stand back from the serial reconstitution programme for individual advisory committees and to consider a broader framework for the various groupings of external experts and stakeholders it wishes to sponsor. Such a framework could then guide (though not straitjacket) the reconstitution proposals then developed by individual committees – and any future proposals for new groupings.

10. The Board is invited to agree that its usual source of collective advice should be through HSE officials. That advice will of course explicitly take account of the views or contributions of stakeholders and scientific experts. However, in addition to this normal route, there may be a number of areas where the Board considers it important to formalise under its own sponsorship the arrangements for securing external advice, consultation or action.

11. The framework proposed below is based on a distinction between HSE's need for scientific advice to **identify and assess risks** around the activities it regulates, and HSE's need for support in enabling dutyholders to **manage risks** more effectively. It assumes that advice in the first area (Category 1 in the table below) needs to be seen as independent, firmly based on scientific evidence and evaluation and offered proactively as well as reactively. As noted, the membership and conduct of groups providing such advice is expected to comply with the Government's Chief Scientific Adviser's (CSA) guidelines. Equally, it is not reasonable to expect such groups to provide stakeholder input on the management of risks: their terms of reference should reflect this.

12. The second area needs to meet a wider range of needs – including those for specific consultation, technical advice on handling issues, and catalysing industry action through stakeholders. The needs may also be ongoing or single task focused. Therefore two or three different types of groups may be needed – this is reflected in categories 2 and 3 in the table below. In the main, membership of such groups would be drawn from stakeholders and non-aligned technical experts. The balance of any group's membership, including its tripartism, would be driven by the role it is intended to discharge.

Category	Role	Appointments and Meetings	Chair
1. Scientific Advisory Committee [for risk assessment]	To provide independent expert scientific advice to the Board, and government more generally, based on scientific knowledge	In consultation with HSE's CSA and in line with the Government CSA's guidelines eg Nolan-type recruitment procedures. Determines own meeting requirements.	Independent
2A. Specialist Panel/Forum [for risk management]	To respond to requests from HSE for an external view on specialist area or defined business grouping (eg SMEs). To provide advice through HSE staff to the HSE Board. Exceptionally, to alert the HSE Board to a critical issue.	Selection based on technical expertise or job role. Will need to ensure good coverage of relevant area and diversity, so could be tripartite. Administered by appropriate HSE function. Meets as necessary to discharge business (option of standing panels may be helpful here).	Board member or HSE staff (usually SMT member for Board-sponsored group)
2B. Action Group [for risk management]	To identify and agree ways forward to improve health and safety outcomes across an industry or sector. To place actions on certain members to take forward with their part of the industry or on behalf of whole Forum. Not advisory to Board or HSE, but may be asked to report progress.	Broadly tripartite and diverse. Should not be driven by numerical equality considerations and should not preclude third parties. Representative structure agreed by HSE Board. Individual appointments from bodies represented (where relevant). Meets periodically, to monitor progress.	External or Board member or HSE staff (usually SMT member for Board-sponsored group)
3. Task and Finish group [for risk management]	To deliver specific timebound remit (usually to provide advice Board or HSE on way to tackle identified problem).	Composition agreed as part of establishing the group. Appointment personal based on knowledge, experience and expertise. Administered by relevant HSE function, and meets as required to complete task.	Agreed as part of establishment process.

Officials propose that, in general, only members of Scientific Advisory Committees should be eligible to receive fees or recompense for loss of earnings in addition to Travel and Subsistence expenses.

12. The Board will wish to decide what its governance of a group (as opposed to management by HSE officials) should entail. As a minimum all standing groups should produce a brief (no more than two sides of A4) annual report of its activities. In addition the Board may choose to set terms of reference which include options to:

- put advice direct to the Board;
- put forward a proposed future programme of work for review and endorsement by the Board.

13. The Board will need to determine which groupings it wishes to 'own', and what guidance to give HSE staff managing others. Officials suggest that ownership is addressed for the existing sponsored committees as reconstitution comes around. Looking ahead, it is proposed that groups in categories 1 and 2 should be subject to a three yearly review of need, function and composition. The Board may also want to reflect if there are any current HSE- supported groups where a formal link would be helpful eg the Small Business Trade Association Forum. Finally, the Board may want to ask HSE staff to follow the framework when establishing similar groupings of stakeholders and technical experts. However, it is recommended that this should not constrain HSE staff from establishing other types of body eg delivery boards, as necessary.

Recommendations

14. The Board is asked to:

- Agree the framework in paragraphs 10-11 as a guide, when reconstituting or establishing new groupings under its sponsorship
- Agree the proposals in paragraph 12 about what as a minimum Board sponsorship of a 'standing' group should involve
- Confirm that it is content to make case by case decisions on the groupings to sponsor, rather than developing criteria to underpin this
- Continue the current programme of reconstituting committees every three years, including those scientific advisory committees sponsored jointly with Government Departments (subject to the latter's agreement in each case)
- Consider what wider communication of an agreed framework is needed, and how best to do this

Paper clearance

15. This paper was produced by Giles Denham and cleared by Geoffrey Podger on 10th April 2008.

Contact

Giles Denham, Director of Policy, Tel: 020 7717 6203
giles.denham@hse.gsi.gov.uk