

HEALTH AND SAFETY EXECUTIVE

CONSTRUCTION INDUSTRY ADVISORY COMMITTEE (CONIAC)

**Minutes of the M2/2014 meeting
held on 23 July 2014 in Rose Court**

<i>Present</i>	<i>Representing</i>
Heather Bryant (Chair)	Health and Safety Executive
Anthony Lees (Secretary)	Health and Safety Executive
Peter Caplehorn	Construction Industry Council
The Reverend Kevin Fear	CITB
Edward Fendt	Specialist Engineering Contractors Group
Rob Gutteridge	Federation of Master Builders
Paul Haxell	Home Builders Federation
Clive Johnson	Construction Clients' Group
Alan Muddiman	Civil Engineering Contractors Association
Susan Murray	Unite
David Parsons	National Federation of Builders
Tony Putsman	Construction Industry Council
Dylan Roberts	UK Contractors Group
John Scott	National Specialist Contractors Council
Dan Shears	GMB
Peter Wilson	UCATT
Guests	
Adrian Belton	CITB
Gren Tipper	Construction Clients' Group
Departmental Observer	
Gilbert Barron	Business, Innovation and Skills
Officials	
Ian Strudley	Health and Safety Executive
Russell Adfield	Health and Safety Executive
Robert Parkes	Health and Safety Executive
Michael Ryan (Secretariat)	Health and Safety Executive
Apologies	
Richard Ash	Engineering Construction Industry Association
Kevin Minton	Construction Plant-hire Association
Steve Murphy	UCATT
Jerry Nelson	GMB
Jason Rowley	UK Contractors Group
Kevin Williamson	Unite
Members of the public	12 were present

Summary of action agreed:

ACTION: HSE to consider client representation on ALG. (See paragraph 4.3)

ACTION: Secretariat to make arrangements to set up a Task and Finish Working Group to consider a health summit. (See paragraph 6.11)

1. Welcome and Chair's introduction

1.1 Heather Bryant (Head of HSE Construction Division and Chief Inspector of Construction) welcomed everyone to the meeting and gave the apologies of absent Members. In particular, Heather welcomed new CONIAC Member, Tony Putsman, who was attending his first meeting, and two guests of CONIAC: Adrian Belton and Gren Tipper.

2 Agreement of Agenda and matters arising

2.1 Members agreed the Agenda.

2.2 Members did not request any other business.

2.3 Members approved the minutes of the 18 March 2014 meeting.

2.4 Heather drew Members' attention to the recently-issued 2013/14 construction fatal accident statistics. She observed that there were 42 fatal injuries to workers in 2013/14. The figures are provisional and subject to possible revision.

2.5 Heather said that the Government had now issued its formal response to the Triennial Review of HSE. The Review concluded that all of HSE's functions are necessary and that HSE is the right organisation to carry them out, and made 38 recommendations including for review of *Fee for Intervention* and exploration of commercial opportunities. The Government accepted all of the recommendations but has indicated that it wishes HSE to go further on offering commercial services.

3. Update on CDM regulatory project

3.1 Heather asked Anthony Lees to update CONIAC. Anthony told CONIAC that he could not give detailed feedback from the consultation since HSE would be reporting to its Board in August and it would be inappropriate to pre-empt that. He reviewed the lengthy process of development of the regulatory project preceding the public consultation. The consultation had drawn a very large number of responses from stakeholders and these were now being analysed. Many responses had been received from CDM-Cs and designers but rather fewer had come from clients and contractors. Of the 150 key stakeholders organisations proactively targeted for consultation about one third had submitted views. The new *Principal Designer* role had attracted much comment as had proposals in relation to competence, with a range of views exhibited. The *Impact Assessment* was being revised in light of information received and a paper for the HSE Board was in preparation. The paper would be fully open and available with other Board papers. Subject to Board

approval the new Regulations were still on course for coming into force in April 2015 as planned. Anthony concluded by asking Kevin Fear to update CONIAC on progress with development of industry guidance on the new Regulations.

3.2 Kevin said that the work was on schedule to deliver finished guidance documents to an internal HSE publications review group by September. He thanked the members of the various drafting groups for their efforts and especially noted the challenge created for them by not having early sight of the draft Regulations. Kevin concluded by distributing copies of the draft documents to CONIAC Members and asking them to submit any comments they may have to the relevant subcommittee chair. Heather thanked Kevin and all of the others who contributed to this project for their work. She clarified that the draft guides are closed documents and should not be circulated wider than CONIAC Members at this stage. This would be reviewed after the outcome of the HSE Board meeting.

3.3 In response to Anthony Lees' observation that contractors had not responded to the consultation in very large numbers, Alan Muddiman outlined the work put in by CECA to provide a collective response on behalf of members. Heather confirmed that HSE was aware of the considerable efforts put in by many representative bodies to provide a collective view following member consultation and that this would be recognised in the HSE Board paper, and more weight given to such consultation returns. Susan Murray expressed concern that the policy of tailoring the guidance for SMEs may reduce its value generally and neglect the needs of others; she noted that when Unite had written specifically for SMEs the response from the target audience had been poor. Peter Wilson added that a survey he had carried out of SMEs had obtained a very poor response. Adrian Belton asked if HSE's consultation had sought to distinguish between firms subject to the CITB levy and those not. Anthony said no although details were sought on company workforce size. Heather concluded the discussion.

4 Update on activities of CONIAC Working Groups

4.1 Heather drew Members' attention to paper **M2/2014/1** which contains detailed information. She asked for oral updates from a number of persons.

4.2 Anthony Lees informed CONIAC that Joy Jones, Chair of the *Safety Working Group*, is moving on and that it is not yet known who will replace her. Heather advised that a replacement would be announced shortly.

4.3 Susan Murray said that the Memos produced by the *Asbestos Liaison Group* (ALG) are very much used by the industry and that the Trades Unions would like to see these continue from the workers' point of view. Peter Wilson mentioned that he had sent a questionnaire on worker involvement to all 49 asbestos licence holders in the Northern region and had received only 3 responses; he considered that this showed a lack of interest in worker involvement. Additionally, he expressed concern about the low industry profile of HSE's worker involvement toolkit. Clive Johnson suggested that a client representative be added to the ALG and indicated that he would be willing to undertake this role. Heather said that this was a sensible suggestion and that HSE would consider it and respond.

ACTION: HSE to consider client representation on ALG.

4.4 Robert Parkes informed CONIAC that he had succeeded Neil Stephens with responsibility for *Working Well Together* (WWT) among other things. Robert said that he had been a former local chair of the Anglian WWT group and that he hoped to see WWT develop further. In particular, he drew Members' attention to a HSE/CITB short film, *Fragile roofs – Fragile lives*, on the consequences of fragile roof falls. This was available on *YouTube* and he hoped that WWT groups would make full use of it. John Scott took the opportunity to record his gratitude to Neil Stephens for all his efforts. Heather added that she saw an important role for all those engaged in CONIAC WWT group activities to drive a step change in health and support CDM 2015 implementation and concluded the discussion.

5. Report on Health Initiative

5.1 Heather drew Members' attention to paper **M2/2014/2** and asked Ian Strudley to update CONIAC. Ian said that the *Health Initiative* was a 2-week national inspection campaign focusing on health risks (which account for 100 times more deaths than safety risks). A press release with initial findings has been issued (<http://press.hse.gov.uk/2014/construction-inspections-find-sites-failing-to-prevent-health-risks/>) and further evaluations will be carried out. Additionally, the National Quarries Inspectorate carried out a separate initiative on silica risks at 36 quarries. HSE inspectors visited a broad cross-section of sites with the aims of raising awareness and enforcing the law where standards were poor. Five hundred sites were chosen to give a good sample of what is going on and it is clear that ill-health risks are ubiquitous in the industry.

5.2 Heather said that safety is in many ways easier than health for inspectors to target but she stressed that the exercise was not a one-off but the start of a longer term much needed push on health in support of the Strategy and the push being asked of others including CONIAC.

5.3 Clive Johnson said that CCG is seeking to drive the health agenda and would like to reassure HSE on this point. Dylan Roberts echoed this remark in the case of UKCG.

5.4 Kevin Fear asked if there had been any opportunity during the inspections to trace back to root causes and, in particular, to assess whether training and lack of knowledge may be at the root. Ian responded that this inspectors had been given the time to look for root causes and that this information would be part of the final report. Alan Muddiman drew attention to the CDM guidance and the opportunity for it to address health issues. In response to a question from Peter Caplehorn, Ian Strudley confirmed that the analysis of the findings of the Health Initiative would distinguish between types of site and types of activity. John Scott suggested that the findings be shared, particularly examples of poor practice (eg manual handling of plasterboard) with photographs which would be helpful in getting information into the public domain.

5.5 Susan Murray welcomed the enforcement initiative on health and offered Unite's help on health issues generally. More specifically, Susan drew attention to exposure standards for respirable crystalline silica and referred to a recent article in *Hazards* magazine on this subject. Peter Wilson remarked on the importance of

cultural factors among workers which may lead them to not use the protective kit they have been issued with. Heather thanked Members for their contributions and closed the discussion.

6. Occupational health in construction (open discussion focusing on Member challenge on health in construction)

6.1 Heather said that this item would discuss, and seek to build on, responses to the proforma issued to Members challenging them on the occupational health issue. She asked Ian Strudley to speak. Ian said that the proforma had elicited a 100% response rate. The responses indicated the health issues perceived as principal concerns by Members including, for example, respiratory and musculoskeletal risks. They showed a willingness to work with HSE and suggested focused effort on agreed targets and on improving collaboration between client, designer and builder. It was thought that CONIAC is well-placed to act in an advisory capacity promoting good standards. Finally, it is thought that there may be merit in the idea of a health summit. Heather asked for Members' comments generally and, in particular, views on a health summit and any role CONIAC might play.

6.2 Kevin Fear emphasised the importance of training and suggested that CONIAC should be explicit on the value of relevant health training and of industry investing in it. Additionally, there needs to be agreement on the syllabus of training courses. Heather suggested the possibility of a range of training from toolbox talks to ½-day training for workers to broader and deeper training leading to qualifications. Kevin agreed that there needs to be a suite of training courses.

6.3 Alan Muddiman agreed with Kevin and added that any initiative on health needs to start at the bottom, that is, training should show the consequences if you don't do the right thing and short videos may be helpful for this. Dylan Roberts suggested that real life case studies from industry of workers who have suffered ill-health effects could be persuasive. Paul Haxell recalled an earlier suggestion for researchers at Loughborough University to demonstrate to CONIAC prosthetic devices they have developed to allow younger workers to experience the debilitating effects of chronic work-related health conditions. Heather asked Paul to liaise with the researchers for delivery of a demonstration. Peter Wilson agreed the need for training complemented by worker involvement including provision of information for health and safety representatives.

6.4 Dan Shears raised three questions: (1) *Who owns health risks on site?*; (2) *Who drives behaviours on site?*; and (3) *How far do workers themselves have personal responsibility?*, which he thought should be borne in mind when designing any initiatives. Susan Murray urged a change of culture to encourage workers to speak up on risks where necessary. Heather said that health and safety and productivity should go hand in hand.

6.5 Edward Fendt believed that CONIAC Members were getting the message but stressed the importance of involvement of CEOs. Dylan Roberts thought that a summit could get the attention of CEOs and Paul Haxell suggested that making shareholders aware of the burden of ill-health on businesses may help to concentrate minds.

6.6 David Parsons believed that ill-health is largely cultural in the sense that workers think “it is not going to happen to me” and to change this attitude we need to employ a broad range of media. In this connection, Ian Strudley remarked that he was surprised at the continuing level of ignorance about asbestos and that people think we have cracked it. Peter Wilson stressed the particular importance of influencing the next generation, including apprentices.

6.7 Adrian Belton accepted that CITB has an important role. He wondered how much of the CITB levy is being used on health-related training and thought that this information might be helpful as evidence to back up initiatives.

6.8 On a possible health summit, Gren Tipper suggested that if we agree collectively what we want we should be able to do it and attempt to get to the majority of the industry. He asked if there is an appetite for self-regulation to an extent? He added that a “health hub” would be useful for industry. Dan Shears thought that a summit was a good idea and could be used as a starting point to build momentum. Alan Muddiman agreed that a summit was a good idea. He suggested that the involvement of the insurance industry in any initiative could be helpful.

6.9 Dylan Roberts wondered if there was anything to be learned from the Green Agenda. Gren Tipper responded that this might provide useful examples of what other industries have done. However, Peter Caplehorn urged caution as in his view the Green Agenda was not as successful as people think.

6.10 Susan Murray said that the *Office of Rail Regulation* had a very good occupational health programme. She wondered if we could look at what they are doing and perhaps have them talk to CONIAC. John Scott supported the idea of a health summit. Additionally, he thought CONIAC could pull all of the disparate health information together in a “health hub”. He urged caution on any temptation to prepare a separate suite of health guidance as it may be perceived as a burden too much for industry.

6.11 Heather said that she was very pleased with the interest and commitment of members and the suggestions offered. In particular she noted: use of media; involvement of insurance industry; sharing information and reviewing what we have already so as to avoid reinventing wheels; and wide support for a summit. She asked for volunteers for a Task and Finish Working Group to explore the summit idea further and feed back to CONIAC before the next meetings and noted expressions from Clive Johnson, Dylan Roberts, Kevin Fear, Gren Tipper, Paul Haxell, Edward Fendt and the TUs. Alan Muddiman asked if there should be one national summit or a set of regional ones? In any event, CEOs should be asked to agree/pledge to something definite. Heather suggested these were questions the Working Group should consider as well as content and timing.

ACTION: Secretariat to make arrangements to set up a Task and Finish Working Group to consider a health summit.

6.12 Heather clarified the role of the existing Health Working Group in relation to the new Task and Finish Working Group and that whilst the focus of the new group was purely on the summit they would need to work with the Health Working Group to ensure the best outcomes. She concluded by asking Members to spread the message about the urgent need to advance the health agenda. She asked Members

to share any further thoughts they have on this with the Secretariat prior to the next meeting. She also suggested that because of the need to further raise the profile on health the Chair of the Health Working Group should consider whether the Group might benefit from an expansion of members on a temporary or permanent basis to provide additional support.

7. Conclusion

Heather said that the next meeting would be on Wednesday 19 November in Rose Court. She expressed her thanks to all.