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## HEALTH AND SAFETY IN HSE – POLICY STATEMENT, THREE YEAR FRAMEWORK AND 2009/10 CORPORATE PLAN

A Paper by Giles Denham and Matt Clay, as Chair and Vice-Chair of the Corporate Health and Safety Committee (CHSC)

Advisor:

Cleared by Giles Denham on 20 March 2009

### Issue

To invite the SMT to consider and approve:

- A revised high level health and safety policy statement for HSE
- A new three year framework for health and safety management in HSE until 2012
- HSE's corporate health and safety plan for 2009/10, and the actions and responsibilities proposed in it.

### Background

HSE's statutory health and safety policy statement has not been updated following the HSC/E merger, apart from removing the other Executive members and leaving the Chief Executive as its only signatory.

Each year the SMT approves a Corporate Plan for health and safety, which sets out the main activities and targets for the year ahead. For the past three years each plan has drawn on a longer term framework for health and safety agreed by the then Board, which has now reached the end of its life.

### Argument

A revised policy statement is at Annex 1. It has been brought in line with HSE's current management arrangements, and includes clearer statements on line management responsibilities, but is little changed otherwise.

The SMT may also want to consider whether both the Chair and Chief Executive should be invited to sign the new policy statement. It would be desirable to engage the non-executive Board, as the ultimate employer of HSE's staff. We think this is best done through the Chair, who already acts as the Board's champion for health and safety. The alternative would be to present the policy statement to the full Board for approval.

The proposed three year framework is at Annex 2. The CHSC spent some time discussing the approach which should underpin it. Our collective view was that we were likely to secure a more positive health and safety culture, and better outcomes, if we built the framework around a relatively small number of goals which staff at all levels could see were relevant, checked regularly on progress, and then used line management to address any issues.

That led CHSC to develop three overarching themes for the framework:

- Providing strong **Leadership**, active **Management** and collective **Ownership**
- Tackling three **Risk Priorities** (DSE, road related risk/lone working and stress)
- Developing **Measurements** and improving **Monitoring**

While seeking the SMT's agreement to all these, we are particularly keen to have your comments on and commitment to the specific activities suggested under the leadership theme.

These themes flow through into the draft Corporate Plan for 2009/10, attached at Annex 3. Points to note include:

- Action 2 – There is a proposal, strongly supported by the trade unions, that Health and safety should be discussed quarterly at SMT meetings, and also whenever it is meaningful and proportionate to do so.
- Action 4 – the development of example health and safety performance objectives would ideally be done early in the 2009/10 reporting year. However, the imminent departure of the Health and Safety Adviser means there will be some delay to this work.
- Risk priorities – CHSC has been unanimous on the selection of these; does SMT have any other suggestions? The focus on DSE could in time be broadened to MSD, if the evidence of risks in HSE justified it.
- Stress (Actions 10 to 13) - We particularly want to focus on improved data, enhanced training for line managers and establishing greater clarity about how the issue can be discussed in a pragmatic way between management and staff.
- Performance measures – Recently HSE has tended to achieve the various incident targets set some years ago: often with very considerable margins of comfort. This year we are proposing to set targets based on recent levels, with some improvement built in. As we are also taking steps to raise awareness (Action 14), any under-reporting may diminish, which would effectively make the new targets more stretching.

## **Consultation**

All three documents have been commented on by the management and trade union members of the CHSC.

## **Presentation**

Once these documents have been approved, they will be published internally with attendant publicity. It is usual for all these documents to be published on HSE's website. The Corporate Plan should be a document that impacts staff throughout HSE, not just those involved in corporate or site committees. We suggest each Directorate should consider how it will build the actions of the Plan into its own operating or business plan, perhaps through discussion at its next Directorate management meeting.

## **Financial/Resource Implications for HSE**

Health and safety activity is funded from management budgets across HSE, and the Corporate Plan does not require that they be given additional resources.

## **Action**

The SMT is invited to:

- Approve the revised Health and Safety Policy Statement at Annex 1 and advise on the Board's involvement with it
- Approve the three year Framework for Health and Safety Management at Annex 2
- Approve the Corporate Plan for Health and Safety at Annex 3, and its own role in delivery

## **Annex 1 – Revised Health and Safety Policy Statement**

### **General policy statement by the Chair and Chief Executive To staff in HSE:**

We are committed to providing you, and others who may work at or visit our premises, with good and safe conditions of work.

This means having in place effective management arrangements that ensure your well being, and minimise the adverse impacts to our business from ill health and injury. It requires that we search out, adopt and update best practice that is relevant and proportionate to the risks involved, and that everyone follows HSE's guidance for relevant activities. We are also committed to creating an environment in which we work together collaboratively.

J Hackitt, Chair, HSE

G Podger, Chief Executive, HSE

The following text explains in more detail how we will put the commitments expressed in the health and safety policy statement into practice

#### **Health and Safety Law**

- We will have effective arrangements in place to ensure HSE complies with all relevant legislation and is already complying with all relevant new health and safety legislation by the time it comes into force.
- We will implement our own published guidance where it is relevant.

#### **Health and Safety Management**

- Through the HSE Senior Management Team (SMT), we will secure the effective operation and continued improvement of the health and safety management system by control of policy formulation, planning, risk assessment, the setting of exemplary standards, targets, implementation, organisation development, performance review and audit.
- The Chair acts as HSE's health and safety champion, and provides oversight on behalf of its wholly non-executive Board
- The SMT, in consultation with the Chair, will set HSE wide performance standards, after receiving recommendations from the Corporate Health and Safety Committee (CHSC) and regularly monitor health and safety progress.
- The SMT will agree and publish a Corporate health and safety plan each year on the basis of a proposal from the CHSC, which will take into account the aims, objectives and targets associated with HSE's strategy and priorities.
- We will aim for similar standards in our purchasing and contract policies.
- We will ensure that all health and safety policies and preventative measures are subject to consultation with staff via Trade Union safety representatives.

- Directors of divisions and directorates have the primary responsibility for ensuring that HSE's policies are implemented within their commands. In some cases, for example the provision of safe building services, responsibility for implementation will rest with others. In these cases we will clearly define responsibilities and take steps to ensure that managers can be confident that the health & safety of their staff is assured.
- Site Safety Coordinators are staff with responsibility for coordinating day-to-day health & safety activities in specific geographical areas. They will liaise with the managers of all those divisions and directorates whose staff are accommodated in the same office accommodation, to ensure a consistent and joined-up approach to managing risk.

### **Consultation with staff and their participation in health and safety issues**

Local safety representatives represent all staff in their workplace. See further detail on the function and appointment of [Local safety representatives](#)<sup>[3]</sup>.

The Corporate Health and Safety Committee is the main forum for joint consultation between HSE management and Trade Union representatives on health and safety issues. The Trade Unions represent all staff in HSE regardless of union membership. See [Terms of reference for the Corporate Committee](#)<sup>[4]</sup>.

The Operations Group Health and Safety Committee will be the forum for consultation on the health and safety of visiting staff. See [Terms of reference for the Operations Group Committee](#)<sup>[5]</sup>.

There will be a local Health and Safety Committee for [Rose Court,] Bootle, Aberdeen, HSL, and each FOD Geographic Division (unless special circumstances indicate that more than one local committee would be more effective). They will cover all HSE staff working at these locations or within the boundaries of each FOD Division. See [Terms of reference for Local Committees](#)<sup>[6]</sup>.

### **Assess and control risks**

Risk assessments will be undertaken, according to a format agreed by the CHSC, and reviewed as appropriate to cover the range of significant hazards to which HSE staff and others may be exposed at HSE sites, at other sites visited by HSE staff as part of their work or whilst travelling on business. Staff co-operation will be sought during the risk assessment process.

The Health and Safety Adviser (HSA), in consultation with the CHSC, will identify H&S policies and guidance that will apply across HSE and arrange for their preparation and publication.

The Operations Group Health and Safety Committee in consultation with the HSA will identify the need for risk assessment based policies and guidance to control the risks to visiting staff and will arrange for their preparation and publication.

We will provide occupational health advice, promotion and surveillance.

We will establish, monitor and review management arrangements for the control of contractors and others who do work on HSE's behalf.

## **Performance measurement**

The Corporate health and safety plan will set objectives and targets including those for the reduction of accidents and ill health taking into account those targets set in the HSE plans.

The SMT will regularly discuss health and safety performance at its formal meetings and will communicate key messages to staff.

Site health and safety committees will be set up to take forward health and safety priorities.

At the end of the operating year sites and Directorates as appropriate will supply a report on progress and achievements to the HSA. These reports, supplemented with accident and ill health report statistics and analysis, will form the basis of the Annual Report on Health and Safety in HSE. This will be available to all staff.

Where individuals have been assigned health and safety responsibilities these will be assessed in the appraisal system. Where training is undertaken to enable individuals to become fully competent a formal record should be maintained in the individual's training records.

Information on health and safety will be included within the HSE's Annual Report in accordance with the guidance issued to all dutyholders by HSE.

## **Auditing and reviewing**

We will devise an audit programme to ensure the effectiveness of the policy. The aims of such audits will be to establish that:

- appropriate management arrangements are in place;
- adequate risk control systems exist, are implemented and are consistent with our hazard profile;
- appropriate workplace precautions are in place.

We will ensure we have the ability to learn from experience and respond to changes thereby fostering continuous improvement. We will consider the possibility of peer review with an external agency.

Audits will be undertaken as joint exercises between Internal Audit, the HSA and other relevant parts of HSE.

## **Annex 2 – Framework for health and safety management – 2009 to 2012**

This framework sets out the key themes that need to be addressed over the next three years to create a more positive health and safety culture. These themes will be incorporated into the annual plans, alongside any other important issues which emerge.

### **Leadership, Management, Ownership**

- *Setting a clear corporate expectation that health and safety will be well managed*

We will do this by:

#### 1. Providing strong leadership

- Health and safety to feature at all Board and SMT visits to HSE offices
- All senior managers to give clear and repeated messages to managers and staff that their health and safety is important
- Discussing health and safety issues at SMT meetings when it is meaningful and proportionate to do so

#### 2. Actively managing health and safety

- Health and safety training to be a core component of the management development programme
- Including specific health and safety objectives in performance agreements and following up in appraisals
- Building on the positive impact achieved by our managing sickness absence programme

#### 3. Owning health and safety

- Demonstrating commitment to do what we say we will do
- Willingness to become involved in local/national initiatives and hazard spotting
- Recognising that health and safety is everyone's business

### **Measurement & Monitoring**

- *Helping drive the right sort of behaviours in terms of the volume and quality of discussions on health and safety at all levels in the organisation*
- *Assessing progress with corporate objectives and taking corrective action*

We will do this by:

#### 1. Clarifying expectations

- Around the interactions staff and management should have on internal health and safety issues
- Making clear individual roles and responsibilities

- Taking steps to develop systems and straightforward guidance that supports managers to successfully deliver good health and safety outcomes.
2. Monitoring indicators of a positive health and safety culture
    - Relevant discussions within teams on health and safety
    - Upwards reporting of team discussions on health and safety
    - Team/Unit, Divisional, Directorate annual reports on what health and safety improvements they have made.
  3. Identifying generic risks to measure and monitor performance, for example
    - DSE risk – self assessments completed and actioned
    - Lone working – diaries maintained
    - Work related road risk – safe driver training courses up to date

## Risk Priorities

In targeting the main causes of harm in HSE we have identified three continuing risk priorities, which reflect both the numbers of incidents recorded and the potential for harm to staff. By monitoring and reviewing our risk profile we will be able to respond appropriately if and when risk priorities change.

- *Make sure that when it comes to the health and safety of our staff, we focus on the risks that matter*

We will do this by:

1. Monitoring reports of accidents, ill health and near misses
  - Developing and maintaining a risk profile
  - Analysing and identifying trends
  - Reviewing risk priorities in light of up to date information
2. Taking forward, through Corporate Plans, work to address current risk priorities in
  - DSE
  - Road related risk and lone working (RR and LW)
  - Stress
3. Monitoring progress with the aim of ensuring by the end of three years
 

DSE

  - 100% up to date assessments [monitored through Cardinus]
  - Appropriate and prompt action taken to address issues identified by assessments [sampling arrangements in place to monitor]

Road related risk and lone working

- Reduction in frequency of road accidents
- Monitoring has taken place on RR and LW guidance

#### Stress

- Significant falls in numbers of IH1s linked to work related stress and in stress related sickness absence

## Annex 3 - HSE's Corporate Plan for Internal Health & Safety for 2009/10

### Introduction

HSE is committed to providing its employees with good and safe conditions of work. This means having in place effective management arrangements that ensure the well being of staff, and to minimise the adverse impacts to individuals and our business from ill health and injury. It requires that we search out, adopt and update best practice relevant and proportionate to the risks involved, and that we follow our own guidance for relevant activities. We are committed to doing this by creating an environment in which managers and staff work together collaboratively.

This plan sets out the principal health and safety improvement activities to take place in HSE during the 2009/10 work-year. Everyone working for HSE has a responsibility to think how they can contribute to delivering the plan's outcomes.

The plan supplements the on-going health and safety activities that continue throughout HSE. The 'Your health & safety' intranet site sets out HSE's health & safety policies and procedures, including responsibilities for health and safety management.

The plan should be seen in the context of the three-year framework for health & safety 2009 to 2012. This framework was agreed by the HSE Senior Management Team (SMT) and Corporate Health & Safety Committee (CHSC) and sets out three key themes that HSE aims to develop in the period up to 2009. These themes are:

- Providing strong **Leadership**, active **Management** and collective **Ownership**
- Tackling **Risk Priorities**
- Developing **Measurements** and improving **Monitoring**

SMT is responsible for ensuring delivery of the plan. The CHSC will monitor progress with the plan at each of three meetings that will take place in the year and alert SMT as necessary, e.g., if we are off track on performance measures or unable to complete actions. Appendix 1 to the plan will act as a monitoring tool.

Other health and safety groups throughout HSE (e.g. local health and safety committees, Operations Group Health and Safety Committee, Stress Working Group and Managing Attendance Support Team) will include the relevant objectives in their plans for 2009/10. At the end of the year these groups will be asked by the Health and Safety Advisor to report on the health & safety activity they have undertaken throughout the year.

Individual line managers and staff members need to be aware of the significant health and safety initiatives planned for the year ahead and what our performance indicators are. The responsibility for implementing the plans and policies set out here remains with line management.

### **Plan content**

The content of the plan relates closely to the three year framework for health & safety [agreed jointly between management & trades unions]. Actions & performance measures proposed for the year ahead are in bold along with a proposed approach to monitoring progress. All these are summarised in Table 1 at the end of the plan.

## **1 Leadership, Management, Ownership**

- We will demonstrate effective leadership and our commitment to health and safety of our staff at the highest level

**Action 1 – Health and safety matters affecting staff to feature at all SMT visits to HSE offices**

**Action 2 – Health and safety to be discussed quarterly at SMT meetings and when it is meaningful and proportionate to do so, e.g., if we are off track on performance measures or unable to complete actions**

How to monitor – HSA to report to CHSC; Chair of CHSC to report back to CHSC

- We will raise the profile of competent health and safety management and ownership.

**Action 3 – Health & safety to be a core component of the management development programme and to be fully integrated throughout it**

How to monitor – HRD Learning & Development are working on this with the HSA and Eliesha (providers). Report to be provided to CHSC by year end.

**Action 4 – Develop meaningful, SMART, example health and safety objectives and promote their inclusion in performance agreements**

How to monitor – HSA to lead the development of objectives and provide feedback from Divisional Directors to CHSC at years end.

- We will monitor our own performance effectively

**Action 5 – We will implement the agreed recommendations which emerged from the audit of internal health and safety incident investigations including;**

- **Clarifying roles and responsibilities**
- **Reviewing and revising guidance**
- **Developing and implementing procedures to ensure that investigation outcomes are progressed and where there are lessons to be learned they are shared across HSE**

How to monitor – Full implementation of revised guidance by October 2009. CHSC to provide a corporate oversight of progress with investigation outcomes and information sharing.

## **2 Risk Priorities**

- We will profile the risks to staff and focus our efforts on the following priorities.

### **DSE**

A project manager has been appointed to update and publish new DSE policy and procedures.

**Action 6 – Complete project looking at DSE from start to finish, to include;**

- **Clarifying the role of managers in assessments**
- **Updating DSE policy and web guidance**
- **Introducing new Cardinus system**

- **Securing (and training) agreed number and geographical spread of DSE assessors**

How to monitor – project manager to report to CHSC at end of year.

### **Road Related Risk/Lone Working (RR/LW)**

- We will revise policies and procedures for both RR and LW, simplifying and making them more accessible to staff.

#### **Action 7 – Revision of policies and procedures to include;**

- **Incorporating survey suggestions**
- **For both, developing a monitoring procedure**
- **For both, clarifying roles of individuals and of managers**
- **For LW looking at producing a call back procedure**

#### **Action 8 – Analyse the causes and pattern of road accidents**

#### **Action 9 – Review provision of safe driver training prior to re-tendering contract (which expires at the end of 2009)**

How to monitor – HSA and HRD to report progress to Spring 2010 CHSC meeting.

### **Stress**

- We will progress work on this topic at a corporate level through the Stress Working Group (membership to be reviewed).

#### **Action 10 – Develop an 'indicator set' to allow a better focus by HSE on particular stress hotspots and/or priority issues**

#### **Action 11 - Complete an analysis of stress cases within HSE looking at work and non-work causes**

#### **Action 12 – Continue to develop a training and development package for new and existing managers on how to spot signs of stress and appropriate preventative and investigative approaches**

#### **Action 13 - Develop proposals for a clearer method of discussion on stress issues between staff and management, including action planning, utilising existing consultative mechanisms where possible (e.g. Divisional Whitleys and H&S committees).**

How to monitor – to be reported to Stress Working Group and end of year summary provided to Summer 2010 CHSC meeting.

### **3 Performance Measures (PM)**

- We have, as far as possible, set SMART (specific, measurable, attainable, relevant, time bound) targets for HSE's health and safety performance that include leading and lagging indicators. Our targets for this year are:

**PM 1 – To have fewer than 70 accidents leading to injury**

**PM 2 – To have fewer than 20 slips and trip related injuries<sup>1</sup>**

**PM 3 – To have fewer than 80 cases of work related ill health**

**PM 4 – To have fewer than 35 cases of DSE related ill health**

**PM 5 – To reduce sickness absence to 6.2 days/staff member for the year**

**PM 6 – All drivers who do more than 5,000 public miles a year are up to date with their safe driving training**

**PM 7 – At least 90% of staff to be up to date with their DSE assessment**

How to monitor – For Measures 1 – 5 reports from records on e-HR will be used and progress fed back to the Board and CHSC via monthly reports and the quarterly balanced scorecard.

#### **4 Measuring and Monitoring**

- We recognise the need to measure and monitor so that we can:
  - Assess progress with corporate objectives and take corrective action;
  - Help drive the right sort of behaviours in staff and management in terms of the volume and quality of discussions on H&S between management and staff at all levels in the organisation.

**Action 14 – Identify and implement monitoring of the sorts of activities that are indicators of a positive health and safety culture, which would likely lead to improved performance, e.g., near miss reporting – reviewing procedures to improve effectiveness and raise people’s awareness of the importance of near miss reports to pattern and trend analysis**

How to monitor – HSA to lead with support from CHSC subgroups. Discussion at CHSC; monthly, quarterly and annual monitoring of performance targets at SMT.

#### **5 Other Topics**

There will be new issues which emerge during the year and require our attention. CHSC will keep this plan under review and advise SMT as necessary to make sure we are focused on the most appropriate mix of topics.

In line with our previously stated commitment we will also ensure that we implement rapidly within HSE any new policies that HSE produces for the rest of the UK.

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<sup>1</sup> PM 2 refers only to HSE staff. Other performance measures relate to HSE staff and non-employees who work on or visit HSE premises.

Appendix: 1

What?	Who to deliver?	How to monitor?	Progress Monitoring			
			Summer 09 CHSC	Autumn 09 CHSC	Spring 10 CHSC	Year end
Action 1 – Health and safety matters affecting staff to feature at all SMT visits to HSE offices	HSA to liaise with Internal Communications to ensure that H&S is incorporated into SMT visit briefings.	HSA to report to Summer 2009 CHSC.				
Action 2 – Health and safety to be discussed quarterly at SMT meetings and when it is meaningful and proportionate to do so, e.g., if we are off track on performance measures or unable to complete actions	Quarterly paper on H&S (drafted by HSA, cleared by Chair CHSC) to be submitted to SMT for discussion	CHSC Chair to ensure paper is submitted to and discussed at SMT and report back to CHSC.				
Action 3 –Health & safety to be a core component of the management development programme and to be fully integrated throughout it	HRD Learning & Development are working on this with the HSA and Eliesha (providers).	HAS to report progress to Autumn 2009 CHSC.				
Action 4 – Develop meaningful, SMART example health and safety objectives and promote their inclusion in performance agreements	HSA to lead the development of objectives. CHSC and SMT to promote their inclusion in performance agreements to Divisional Directors.	Objectives to be provided for inclusion into PA's by checkpoint reviews HSA to provide feedback from Divisional Directors on to CHSC in 2010/11 on how well the objectives have worked.				

Appendix: 1

What?	Who to deliver?	How to monitor?	Progress Monitoring			
			Summer 09 CHSC	Autumn 09 CHSC	Spring 10 CHSC	Year end
<p>Action 5 – We will implement the agreed recommendations which emerged from the audit of internal health and safety incident investigations including;</p> <ul style="list-style-type: none"> <li>• Clarifying roles and responsibilities</li> <li>• Reviewing and revising guidance</li> <li>• Developing and implementing procedures to ensure that investigation outcomes are progressed and where there are lessons to be learned they are shared across HSE</li> </ul>	<p>Delivery of actions as identified in audit report.</p>	<p>Full implementation of revised guidance by October 2009. CHSC to provide a corporate oversight of progress with investigation outcomes and information sharing</p>				
<p>Action 6 – Evaluate the suitability and benefits of adopting DWP's Wellbeing and Productivity Management (WPM) programme into HSE</p>	<p>HSA and HR service centre to liaise with DWP and provide information to CHSC for evaluation.</p>	<p>Discussion and decision at CHSC by Summer 2009.</p>				
<p>Action 7 – Complete project looking at DSE from start to finish, to include;</p> <ul style="list-style-type: none"> <li>• Clarifying the role of managers in assessments</li> <li>• Updating DSE policy and web guidance</li> <li>• Introducing new Cardinus system</li> <li>• Securing (and training) agreed number and geographical spread of DSE assessors</li> </ul>	<p>Project manager with support from HSA and HRD.</p>	<p>Delivery timetable to be provided to Task &amp; Finish Group by end March 2009. Project manager to report to CHSC at year end. HSA to update intranet policy and guidance by year end.</p>				
<p>Action 8 – Revision of RR &amp; LW policies and procedures to include;                      Incorporating survey suggestions                      For both, developing a monitoring procedure                      For both, clarifying roles of individuals and of managers                      For LW looking at producing a call back procedure</p>	<p>HSA and HRD</p>	<p>HSA and HRD to report progress to Spring 2010 CHSC meeting</p>				

Appendix: 1

What?	Who to deliver?	How to monitor?	Progress Monitoring			
			Summer 09 CHSC	Autumn 09 CHSC	Spring 10 CHSC	Year end
Action 10 – Review provision of safe driver training prior to re-tendering contract (which expires at the end of 2009)	HSA and HRD	HSA and HRD to report progress to Spring 2010 CHSC meeting				
Action 11 – Develop an 'indicator set' to allow a better focus by HSE on particular stress hotspots and/or priority issues	SWG	SWG to lead - report to Summer 2010 CHSC meeting				
Action 12 – Establish a training and development package for new and existing managers on how to spot signs of stress and appropriate preventative approach	SWG	SWG to lead - report to Summer 2010 CHSC meeting				