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. Annex 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.

- We will actively promote a healthy environment and culture across the whole of our organisation.
  
  **Action 6 – Evaluate the suitability and benefits of adopting DWP’s Wellbeing and Productivity Management (WPM) programme into HSE**
  
  How to monitor – discussion and decision at CHSC.

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 7 – 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 8 – 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 9 – Analyse the causes and pattern of road accidents**

**Action 10 – 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.

**Action 11 – Develop an ‘indicator set’ to allow a better focus by HSE on particular stress hotspots and/or priority issues**

**Action 12 – Establish a training and development package for new and existing managers on how to spot signs of stress and appropriate preventative approach**

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

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1 PM 2 refers only to HSE staff. Other performance measures relate to HSE staff and non-employees who work on or visit HSE premises.
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 13 – 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 always using our limited resources to address 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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<th>What?</th>
<th>Who to deliver?</th>
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<th>Progress Monitoring</th>
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</thead>
<tbody>
<tr>
<td>Action 1 – Health and safety matters affecting staff to feature at all SMT visits to HSE offices</td>
<td>HSA to liaise with Internal Communications to ensure that H&amp;S is incorporated into SMT visit briefings.</td>
<td>HSA to report to Summer 09 CHSC.</td>
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<td>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</td>
<td>Quarterly paper on H&amp;S (drafted by HSA, cleared by Chair CHSC) to be submitted to SMT for discussion</td>
<td>CHSC Chair to ensure paper is submitted to and discussed at SMT and report back to CHSC.</td>
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<td>Action 3 – Health &amp; safety to be a core component of the management development programme and to be fully integrated throughout it</td>
<td>HRD Learning &amp; Development are working on this with the HSA and Eliesha (providers).</td>
<td>HAS to report progress to Autumn 09 CHSC.</td>
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<td>Action 4 – Develop meaningful, SMART example health and safety objectives and promote their inclusion in performance agreements</td>
<td>HSA to lead the development of objectives. CHSC to promote their inclusion in performance agreements to Divisional Directors.</td>
<td>Objectives to be provided for inclusion into PA’s by HSA to provide feedback from Divisional Directors on to CHSC at years end on how well the objectives have worked.</td>
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<td>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</td>
<td>Delivery of actions as identified in audit report.</td>
<td>Full implementation of revised guidance by October 2009. CHSC to provide a corporate oversight of progress with investigation outcomes and information sharing</td>
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<td>Action 6 – Evaluate the suitability and benefits of adopting DWP’s Wellbeing and Productivity Management (WPM) programme into HSE</td>
<td>HSA and HR service centre to liaise with DWP and provide information to CHSC for evaluation.</td>
<td>Discussion and decision at CHSC by Summer 09.</td>
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<td>Action 7 – Complete project looking at DSE from start to finish, to include;</td>
<td>Project manager with support from HSA and HRD.</td>
<td>Delivery timetable to be provided to Task &amp; Finish Group by end March 09. Project manager to report to CHSC at year end. HSA to update intranet policy and guidance by year end.</td>
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### Annex 1

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