

HSE Delivery Plan

For the period 1 April 2011 to 31 March 2012

Our mission

The prevention of death, injury and ill health to those at work and those affected by work activities

2. Avoiding catastrophe

Provide public assurance that health and safety risks within those high hazard industries which are strategically important to the country's economy and which have the potential to cause catastrophic harm to their workers and the public at large, are effectively managed and controlled

2.1.3.	Annual Intervention Programmes in key sectors delivered:	Mar 2012
	<ul style="list-style-type: none"> • All cornerstone Licence Condition¹ inspections within the nuclear sector. • Agreed number of non-cornerstone Licence Condition inspections (required once every 36 months) within the nuclear sector. • Targeted interventions (safety report assessments, inspections and audits) at 100% (196) of the highest hazard COMAH sites and a further 25% (200) of the high hazard COMAH sites. • Offshore manned production installations inspected twice a year and non-productive or normally non-manned installations once a year (a total of 270 installations). • Targeted interventions at 100% of the highest priority sites in the specialised industry sectors (biological agents, explosives, gas and pipelines, and mines). • 1500 Liquefied Petroleum Gas pipework inspections. 	
2.1.4.	Ten KP4 (three-year offshore Ageing and Life Extension Inspection Project) inspections completed.	Mar 2012
2.2.	GDA Step 4 Outcome Technical and Summary Reports published. ²	Jun 2011
	Interim or Final Design Acceptance Confirmation for each design issued. ²	Jun 2012
2.3.1.	Criteria for the effectiveness of regulation of higher hazard activities (CCS, offshore wind, waste to energy and Liquefied Natural Gas regassing) developed.	Sep 2011
	Projects initiated to examine higher hazard EET activities (offshore wind and waste to energy).	Jun 2011
2.4.1.	Appropriate governance structure set up.	Apr 2011
	Review completed.	Sep 2011

¹ A Licence Condition compliance inspection seeks to gain information on the quality of a licensee's arrangements to comply with the conditions of their nuclear site licence, and other statutory requirements, and their performance in implementing them. Cornerstone Inspections are the minimum licence compliance inspections considered necessary to provide assurance of adequate control of nuclear safety by the licensee. These will change in response to issues emerging at each site.

² Delivery dates are being reconsidered in light of the recent events in Japan.

3. Clarifying ownership of risk and improving compliance

Motivate others in the health and safety system to address their responsibilities in a common sense and proportionate manner and contribute to improving health and safety performance

3.1. Simplify health and safety regulations to remove duplication, reduce the burden on business and, as a minimum, maintain the protection of workers and those affected by work activities.

- 3.1.1. Consult on proposals to amend the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 1995, through which businesses record workplace accidents (*Common Sense, Common Safety* recommendation).
- 3.1.2. Abolish the Adventure Activities Licensing Authority and replace licensing with a code of practice (*Common Sense, Common Safety* recommendation).
- 3.1.3. Implement simplified regulations in major hazards areas: (i) bioscience and laboratory-type work with hazardous biological agents and (ii) explosives.
- 3.1.4. Conduct a review of mining legislation to simplify the regulatory system.
- 3.1.5. Contribute to the Department for Business, Innovation and Skills (BIS) Enforcement White Paper setting out proposals for better co-ordinated inspection of multi-site retail businesses (*Common Sense, Common Safety* recommendation).

3.2. Maintain and improve the protection of people at work and the environment and negotiate and secure the best possible outcome for British industry within Europe to maximise savings and minimise the burden on business.

- 3.2.1. Take the lead on negotiations in Europe in relation to a number of Directives and Regulations.
- 3.2.2. Represent the UK Government's interests on both the Governing Board and Advisory Committee of the European Agency for Safety and Health at Work.
- 3.2.3. Work with DECC and MCA to negotiate on European Commission (EC) proposals resulting from the Deepwater Horizon incident in the Gulf of Mexico.
- 3.2.4. Effectively participate on the UK's behalf in European Union (EU) Competent Authority (CA) business in relation to the biocides, pesticides, detergents and industrial chemical regimes.
- 3.2.5. Regulate the supply and use of biocides, pesticides, detergents and industrial chemicals according to EU requirements, determining as appropriate product applications in accordance with regulatory standards.

3.3. Rationalise and improve access to web-based guidance to enable businesses, particularly those in small and low risk businesses, to easily understand their health and safety obligations and meet them in the simplest, most straightforward way.

- 3.3.1. Undertake a fundamental review of HSE's guidance (eg publications, tools, webpages etc) to help businesses understand what they have to do

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to comply with health and safety law in an effective and proportionate manner. Criteria used to prioritise areas for review will include size of audience, cost of compliance to business, date since last review and number of publications.

3.3.2. Review and re-launch existing guidance for home workers in low hazard environments (*Common Sense, Common Safety* recommendation).

3.4. Enable access to independent competent, professional and up-to-date health and safety advice through an Occupational Safety and Health Consultants Register (OSHCR).

3.4.1. Administer the OSHCR to make it easier for businesses to know where to find appropriate, competent sources of advice, following the register's launch in 2010/11 (*Common Sense, Common Safety* recommendation).

3.4.2. Facilitate the transfer of the OSHCR to professional bodies.

3.5. Focus proactive inspection on the highest risk sectors, where it is judged to be an effective intervention. HSE will concentrate proactive inspections in those industries and companies which present significant risk and inspection is an appropriate intervention to improve the control of risk, eg asbestos, construction, waste and recycling.

3.6. Work more effectively in partnership with key stakeholders (including businesses, trade unions and third sector organisations) in industries and occupations where there is a higher risk of accidents or ill health. We will provide our expertise to raise awareness, create behavioural change and influence others to find their own solutions and take ownership for driving forward improvements in health and safety standards.

3.6.1. Develop appropriate communications interventions to tackle key health and safety issues and create behavioural change, using cost-effective and, where possible, no-cost ways to reach and engage target audiences.

3.6.2. Promote the benefits of effective health and safety leadership throughout all levels of an organisation to establish commitment to and accountability for health and safety performance.

3.6.3. License the 'Do Your Bit'³ training initiative to facilitate an improvement in workforce consultation in health and safety and encourage better consultation in small and medium enterprises (SMEs).

3.7. Continue to focus on the true role and remit of health and safety and HSE, drawing the distinction between real health and safety risks, which threaten serious harm to people in the workplace, and the other types of risk averse behaviour.

3.7.1. Develop proactive, low-cost public relations programme to position HSE as a responsible and proportionate regulator, educating target

³ www.hse.gov.uk/involvement/doyourbit/index.htm

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- audiences on the role of HSE.
- 3.7.2. Implement plans to work with stakeholders and trusted third parties to influence the debate on health and safety and leverage the size and scale of third party channels at minimal cost.
- 3.7.3. Monitor, rebut and correct trivial or ill-informed criticism which damage the reputation of health and safety.

MILESTONES/EVIDENCING PROGRESS

	DATE
3.1.1. RIDDOR consultation concluded.	Apr 2011
Amendments to regulations (if required) implemented.	Apr 2012
3.1.2. Consultation on draft voluntary code of practice launched.	May 2011
3.1.3. Single set of dangerous human and animal pathogens and Genetically Modified Organisms in containment regulations implemented.	Apr 2012
3.1.4. Simplified explosives legislation, replacing several sets of regulations implemented.	Apr 2013
Review of mining legislation completed.	Jul 2011
Mining legislation simplification project completed.	Apr 2013
3.1.5. Consultation document in association with BIS published.	May 2011
3.2. Proposals for the UK's response to the EC on the implementation of the Asbestos Workers' Protection Directive agreed and submitted to the EC.	Apr 2011
Plant Protection Products Regulations implemented.	Jun 2011
Sustainable Use Directive implemented.	Nov 2011
3.2.1. Negotiated position in relation to Directives including HSE Board and Ministerial agreement:	
• Electromagnetic Fields Directive;	Apr 2011
• Basic Safety Standards Directive; and	May 2011
• Musculoskeletal Disorders Directive.	Jun 2011
UK position on Seveso III Directive developed.	May 2011
UK position on Carcinogens and Mutagens Directive developed.	Apr 2012
EC Biocides Regulation adopted.	Jan 2012
Draft UK report on pilot study of practical implementation of the Occupational Safety and Health (OSH) Directives in 2013 completed.	Jul 2012
3.2.3. UK negotiating lines agreed within three months of publication of EC proposals.	Sep 2011

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3.2.4. UK agreed lines promoted within the EC and other European regulators. Participated on the UK's behalf in EU CA meetings: <ul style="list-style-type: none"> • five on biocides; • three on REACH and classification and labelling; and • two on Prior Informed Consent. 	Dec 2012 May 2012
3.2.5. Biocide and pesticide evaluations completed within stated timescales.	Quarterly
3.3.1. 25% of all HSE's website content and publications portfolio (areas include RIDDOR; risk; first aid and other sector/risk areas) reviewed, revised and, where appropriate, improved.	Oct 2011
3.3.2. Guidance on home workers launched.	Aug 2011
3.4.2. Transition plan for the transfer of OSHCR to professional bodies in place.	Dec 2011
3.5. Programme of inspections delivered to: <ul style="list-style-type: none"> • nine of the most significant national waste management companies; • one-third of local authorities as the procurers and contract managers of waste and recycling services; • between 80–120 waste electronic and electrical equipment (WEEE) recycling premises ('hotspot' sites); • 1500 visits to licensed asbestos removal work to assess standards and ensure licence holders demonstrate effective leadership in tackling asbestos risks; • at least five wind farms per division (except London) within the wind energy industry covering a wide range of significant health and safety issues; and • at least 1200 site inspections within the construction refurbishment sector as part of an intensive inspection initiative. 	Mar 2012
3.6. Web-based Leadership and Worker Involvement tool specifically aimed at SMEs in construction launched.	Jan–Mar 2012 Jun 2011
Programme of 26 Safety, Health and Awareness Days (SHADs) within the agricultural sector delivered.	Mar 2012
Programme of 15 Partnership Boards in five sectors where the risk of respiratory diseases are higher (foundries, construction, welding, quarries and stoneworkers) delivered.	Mar 2012
Programme of 50 Working Well Together partnership events, including SHADs, Designers Awareness Days and White Van Roadshows to engage with the micro SME sector of the construction industry delivered.	Mar 2012
3.6.1. Social marketing toolkit launched and available for staff.	Jun 2011
Partnership marketing strategy, plans and tools and clear governance arrangements for partnership marketing in place.	Sep 2011
3.6.2. Five case studies on specific leadership behaviours developed and communicated.	Mar 2012

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4. Securing justice	<i>Investigate work-related incidents and ill health and take enforcement action to prevent harm and to secure justice when appropriate</i>	
4.1.	Investigate incidents or complaints which have caused, or have the potential to cause harm.	
4.1.1.	Investigate those incidents that meet HSE’s incident selection criteria, focusing on the most significant failures.	
4.1.2.	Investigate complaints that meet HSE’s agreed risk-based criteria.	
4.2.	Take enforcement action in accordance with the HSE Enforcement Management Model to prevent harm and secure justice when appropriate.	
4.2.1.	Issue Improvement and Prohibition Notices as set out in sections 21, 22 and 23 of the Health and Safety at Work etc Act 1974.	
4.2.2.	Prosecute those who commit serious breaches of the law through the robust application of the HSE Enforcement Policy Statement. ⁴	
4.2.3.	Widely publicise prosecutions to deter businesses from non-compliance with health and safety legislation.	
<u>MILESTONES/EVIDENCING PROGRESS</u>	DATE	
4.1.1.	The proportion of incidents meeting HSE’s selection criteria which are investigated.	Quarterly
4.1.2.	The number of complaints received, followed up and completed within appropriate timescales.	Quarterly
4.2.1.	The number and type of notices issued.	Quarterly
4.2.2.	The number of prosecution cases approved and the percentage of successful prosecutions.	Quarterly
4.2.3.	Media coverage achieved in relation to prosecutions.	Quarterly

⁴ www.hse.gov.uk/pubns/hse41.pdf

3. Our resources

HSE's Spending Review 2010 settlement requires grant-in-aid savings of at least 35% in real terms over the period (2011/12 to 2014/15) while sharing more of the cost with those businesses who create risks.

HSE adopted a prudent approach in 2010/11 to position itself which included the completion of a Voluntary Exit scheme which reduced staffing by 200 (175 full-time equivalents (FTEs)). HSE, like the rest of the public sector, is seeking to deliver its services and meet its responsibilities more efficiently. We believe the changes we are making will enable us to carry out our role effectively while delivering value for money to the taxpayer.

HSE's Net Resource Budget for 2011/12 is £198.7 million.

	Outturn 2009/10 £m	Forecast 2010/11 £m	Budget 2011/12 £m
Total Gross Expenditure	327.6	324.5	310.2
Income	(99.9)	(116.4)	(111.5)
Net Resource Departmental Expenditure Limit	227.7	208.1	198.7
Net Capital	11.6	6.5	6.7

Staffing	Actual 1 April 2010 FTEs	Forecast 1 April 2011 FTEs	Forecast 1 April 2012 FTEs
HSE	3 320	3 047	3 040
HSL	382	366	356
Total	3 702	3 413	3 396

