

# **The Health and Safety Commission Annual Business Plan 2006/07**

## The Health and Safety Commission

Bill Callaghan *Chair*



*Members*

Margaret Burns  
Danny Carrigan  
Judith Donovan  
Sayeed Khan  
John Longworth  
Hugh Robertson  
Elizabeth Snape  
Sandy Blair  
Vacancy

## The Health and Safety Executive

Geoffrey Podger  
*Chief Executive*

Jonathan Rees  
*Deputy Chief  
Executive*

Justin McCracken  
*Deputy Chief  
Executive*



## The HSE Board

Vivienne Dews *Resources and Planning Directorate*

Dr Paul Davies *Chief Scientist*

*Corporate Science and Analytical Services Directorate*

Giles Denham *Policy Group*

Jane Willis *Policy Group*

Colin Douglas *Communications Directorate*

Sandra Caldwell *Field Operations Directorate*

Mike Weightman *Nuclear Safety Directorate*

Kevin Myers *Hazardous Installations Directorate*

Eddie Morland *Chief Executive of the Health and Safety Laboratory (HSL)*

Alex Brett-Holt *Legal Adviser's Office*

## Foreword

A year ago, we published the Health and Safety Commission's Business Plan for 2005/06-2007/08. That document set out how we would implement the *Strategy for Workplace Health and Safety in Great Britain to 2010 and Beyond* and deliver our Public Service Agreement (PSA) targets over the three-year period. This supplement sets out our more detailed plans for 2006/07.

Delivering the PSA is a task that we take very seriously. During 2005/06 the Strategic Programmes have progressed well, along the lines set down by the Strategy, to improve the control of risks in the workplace and thereby improve health and safety outcomes.

We want to build on the success shown by the *Health and Safety statistics for the year 2004-05* (published November 2005) where we concluded that we were probably on track on the 'ill health' and possibly on 'days lost' targets, but still have progress to make on the 'injury reduction' target. We are on track to deliver all three targets relating to our major hazards work.

Other work is important too. We will investigate in serious cases when things go wrong and prosecute when we find significant breaches of the law. Above all, we will continue to learn lessons and publicise them to help prevent others being killed or harmed. In this we will strive to act in proportionate ways and promote 'sensible health and safety'. We are determined to counter the negative images of health and safety that emerge from time to time.

We are conducting a Fundamental Review of the way we deliver our business. This will help us prepare for the Comprehensive Spending Review due to start in late 2006, identify ways to improve the running of the organisation, secure value for money, and help HSE continue to succeed in the future. This may lead to new plans for 2007/08, if not earlier.

Working through others is important to us. Partnerships with other government bodies, Parliamentarians, and the public and private sectors are key parts of providing occupational health and safety support (for example, through the new Workplace Health Connect pathfinders). We are also engaged in *Work, Health and Well-being – Caring for our Future*, a tripartite strategy for the health and well-being of people of working age, in conjunction with the Department of Health and the Department for Work and Pensions. We will continue also to strengthen the relationship with our local authority partners.

We are keen to build on the successful publicity campaigns we have run in the past year, which have proved even more effective in delivering health and safety improvements by being combined with operational activity. This year we are planning *Backs! 2006*, a further big campaign targeting musculoskeletal disorders.

We are also pleased that HSE has been asked by the Department of Trade and Industry to produce an expert report on health and safety issues and potential risks relating to significant energy sources and technologies, as a contribution to the Government's Energy Review.

Last year saw the publication of the final report from Philip Hampton's review of regulatory inspection and enforcement. We have been named as one of only seven thematic regulators into which a number of other, smaller regulatory bodies will be consolidated, and we see this as a vote of confidence and recognition that HSE is at the forefront in applying the Government's better regulation principles.

We are now 12 months into our three-year plan, so it is time to reflect on the successes and challenges of the last year and set our course for the next two. This document is the first step along that path.

A handwritten signature in black ink that reads "Bill Callaghan". The word "Callaghan" is written in a cursive style with a large, circular flourish around the "C".

Bill Callaghan *Chair*

A handwritten signature in black ink that reads "Geoffrey Podger". The signature is written in a cursive style with a large, sweeping flourish under the "G".

Geoffrey Podger *Chief Executive*

## Introduction

1 This document summarises the key activities and interventions that the Health and Safety Commission (HSC) and the Health and Safety Executive (HSE) have planned for 2006/07. It should be read along with our three-year business plan, which sets the strategic framework and direction for 2005/06 to 2007/08. Further details can be found on HSE's website.

2 This plan recognises that in order to be a 21st century regulator, HSC/E must:

- strive to meet the Public Service Agreement (PSA);
- secure and maintain public confidence;
- understand clearly the impact and cost of interventions;
- provide value for money;
- support wider government goals; and
- continue to meet its statutory obligations.

3 Last year's plan outlined how we would use the resources made available to us over the three-year period to March 2008. Our strategy was to build up our capability during 2005/06. Over the next two years, we will maintain delivery using efficiency gains to offset the gradual decline in spending power as we absorb inflationary pressures on our essentially flat budget.

4 Work streams planned for 2006/07 fit into the delivery framework proposed in the HSC Business Plan 2005/06-2007/08, and there have been no major changes in our strategic direction. Plans have been revisited and refined, and some small adjustments to budget allocation have been made in light of progress in the past year. A broad mix of interventions will be maintained in both the conventional health and safety and major hazard areas.

5 The proposed *administrative budget* for 2006/07 shows a slight cash increase on that of last year (after taking into account the transfer of HSE Rail to the Office of Rail Regulation on 1 April 2006) and, on the whole, allocation to our different areas of business will be of the same magnitude. While we have increased our number of staff in the past year, particularly in areas where a skills gap has been identified, numbers will fall slightly over the next two – mainly in support functions.

6 The proposed *programme budget* for 2006/07 also shows a slight cash increase on the 2005/06 budget. The proportion of programme funding allocated to communication activity has been maintained and remains significantly greater than any spend on this important business area prior to 2005/06. There will be a significant increase in spending on 'grant schemes' due to the continuing roll-out in 2006/07 of Workplace Health Connect.

## Governance

7 HSC/E's governance structure is:

- **Ministers** approve the HSC Strategy and approve the Business Plan.
- **HSC** sets the direction for HSE's decision making and the overarching framework that HSE needs to deliver the targets.
- **HSE's Board** has absorbed the duties of the Resource and Delivery Group, to simplify and strengthen the governance structure. The Board is responsible for managing the performance of HSE's portfolio of programmes and ensuring a sound financial position.

8 We plan to explore how we can further strengthen governance arrangements, in line with best practice across the public sector bodies, and consider how HSC and HSE can continue to work together successfully.

9 During 2006/07, HSE will continue to take forward work to incorporate the roles of a number of other regulators, as recommended by the Hampton Review.<sup>1</sup>

## Targets

10 In 2000, the Government and HSC set national health and safety targets as part of the *Revitalising Health and Safety strategy*.<sup>2</sup> The RHS indicators have been adopted as part of a Public Service Agreement (PSA) to:

**By 2008 improve health and safety outcomes in Great Britain through progressive improvement in the control of risks in the workplace.**

11 The PSA targets are, by 2007/08 (from a 2004/05 baseline), to reduce:

- the incidence rate of fatal and major injuries by 3%;
- the incidence rate of work-related ill health by 6%;
- the number of working days lost per 100 000 workers from injury and ill health by 9%; and by 2007/08 (from a 2001/02 baseline) to reduce:
- the number of events reported by licence holders, which HSE's Nuclear Installations Inspectorate judges as having the potential to challenge a nuclear safety system, by 7.5%;
- the number of major and significant hydrocarbon releases in the offshore oil and gas sector by 45%;
- the number of relevant RIDDOR<sup>3</sup> reportable dangerous occurrences in the onshore sector by 15%.

For further information see: [www.hse.gov.uk/aboutus/plans/sr2004.htm](http://www.hse.gov.uk/aboutus/plans/sr2004.htm)

12 The annual statistics for 2004/05, mentioned in the foreword, reported substantial progress on both the working days lost and work related ill health targets, reflecting the real progress towards delivery now being achieved. There was, however, no change in the incidence rate of fatal or major injuries. Although there has been significant improvement in specific sectors, for example a 25% reduction in injury incidence in construction over the last five years, a challenge remains in the service sector.

1 Government's review of regulatory inspection and enforcement undertaken by Philip Hampton.

2 - a 30% reduction in number of working days lost per 100 000 workers from work-related injury and ill health;  
 - a 20% reduction in the incidence rate of cases of work-related ill health;  
 - a 10% reduction in the incidence rate of fatal and major injury incidents.

3 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

## Investigation and enforcement

13 Investigating incidents and enquiring into citizen's complaints and concerns remain important activities. HSE will continue to be tough on those businesses that wilfully break the law and put people at risk. Inspectors will not hesitate to use their powers of enforcement (including prosecution where necessary) to achieve the necessary improvements to safeguard people's health, safety and welfare. Further information on the Enforcement Strategic Enabling Programme is given in paragraph 35.

14 We have been pressing for penalties for health and safety offences that properly reflect their seriousness, and the Government is committed to raising the maximum penalties when there is a legislative opportunity and as parliamentary time allows. We are playing an active role with the Cabinet Office's 'Better Regulation Executive', which is reviewing the sanctions available to regulators – including penalties. This review is due to report in the Autumn. We are also evaluating the HSC's Enforcement Policy Statement, which is due for review in 2007.

15 HSE inspectors, and other front line staff, play a critical role by:

- inspecting workplaces;
- providing information and advice to better manage risk;
- carrying out assessments;
- investigating incidents when things go wrong;
- investigating complaints; and
- enforcing the law, including prosecution, when there has been a serious breach.

We recognise that enforcement action, as well as dealing directly with those that break the law, has an important deterrent effect in the wider health and safety community. We welcomed the recent groundbreaking fines from the courts for serious breaches of health and safety.

## HSE's Strategic Programmes

16 HSE has established two Strategic Delivery Programmes (SDPs) as the main agent for delivering the PSA targets: *Fit for work*, *Fit for life*, *Fit for tomorrow* (Fit3) and Major Hazards. Four Strategic Enabling Programmes (StEPs) support the SDPs' work. Examples of key activities that the Strategic Programmes have planned for 2006/07 are given below.

### Fit for work, Fit for life, Fit for tomorrow Strategic Delivery Programme (Fit3)

17 Fit3 is a three-year programme focused on delivering the conventional health and safety element of the PSA. It is now entering its second year. Fit3 is divided into three main work blocks, comprising a mix of targeted interventions, aligned with conventional health and safety PSA targets (ie injury reduction, ill health reduction and reduction in days lost due to work activity). The SDP's content is based on analysis of the incidence of injury and ill health across known hazard and business sector hotspots.

18 A mixture of project work, programme directed inspection and (where necessary) investigation and enforcement support each work block. Other important work streams, involving staff from across HSE (eg utilising communication activity, engaging with stakeholders, developing partnerships and revising standards and legislation) make significant contributions to Fit3's work. In 2005/06, there was a further move to focus HSE inspectors' activity on areas where their enforcement powers are most likely to be required.

19 Major initiatives and interventions planned to achieve a reduction in the incidence of work-related fatal and major injuries include:

- working with stakeholders to produce an agreed set of workplace transport management standards;
- 'Moving goods safely' – a supply chain initiative aimed at reducing injury and ill health arising from the movement of goods in the logistics, road haulage and goods delivery sectors;
- undertaking a major media campaign aimed at promoting safe work at height and implementing the Work at Height Regulations 2005, backed by operational activity to embed improved working practices;
- addressing slips and trips in target sectors, including the chemical industry using a range of operational interventions and following up and evaluating last year's 'Watch Your Step' campaign; and
- revising the Construction (Design and Management) Regulations 1994, ACoP and guidance, followed by a campaign aimed at the construction and design industries to raise awareness.

20 Initiatives to achieve a reduction in work-related ill health include:

- providing an independent, 3-tier health and safety support service for small firms. We launched the 'Pathfinders' for Workplace Health Connect in February 2006. The service includes a confidential, impartial advice and support helpline/website for smaller businesses, focused on occupational health issues, reducing sickness absence and assisting rehabilitation and return to work;
- rolling out HSE's Stress Management Standards to 2000 organisations in local and national government and the health and financial services sectors, using a direct marketing strategy aimed at Chief Executives in conjunction with a series of workshops for HR professionals;
- following up the success of last year's national publicity and stakeholder engagement campaign on musculoskeletal disorders, *Backs! 2006* will be supported by a targeted inspection campaign;
- a series of Safety and Health Awareness Days addressing occupational asthma aimed at the motor vehicle repair and woodworking industries, supported by a targeted inspection campaign and wide-scale operational interventions on asthma and skin disease in local authority enforced sectors;
- supporting the revised Noise at Work Regulations with an awareness and worker involvement campaign.

21 To achieve a reduction in days lost due to work-related injuries and ill health, the Fit3 programme will continue to target the public sector by:

- maintaining the commitment of other government departments to tackling this issue through the Ministerial Task Force. In particular, we will seek to influence senior management in the top 350 public sector organisations, sharing best practice and encouraging departmental 'champions';
- working with employers in the health service to address key issues including stress, manual handling, slips and trips, sickness absence and return to work, violence and aggression, and safety by design; and

- developing a benchmarking tool to measure local authority performance on managing sickness absence.

## Major Hazards Strategic Delivery Programme

22 The Major Hazards SDP continues to focus on HSE's work regulating and assuring safe management and control of those industries where catastrophic failures have the potential to cause significant harm.

## Nuclear

23 HSE's Nuclear Programme delivers work designed to achieve effective and efficient nuclear safety regulation, the ongoing aims being:

- to prevent major nuclear incidents;
- to maintain the effective management of nuclear waste; and
- to reduce the number of reports of occurrences with the potential to lead to an accident.

24 During 2006/07, the programme will face a significant amount of new work resulting from restructuring within the industry, accelerated decommissioning and clean up, and new investment programmes. Particular emphasis will then be placed on prioritising nuclear work to target our regulatory activities correctly and achieve greater consistency, proportionality and productivity.

25 There will also be further refinements to the programme's Integrated Intervention Strategy, developing targeted intervention strategies for every duty holder/site so as to ensure that duty holders maintain their safety focus in the face of industry changes and other issues. Within the intervention strategy for each site:

- a significant proportion of the planned inspection interventions will be focused on the 'cornerstone' factors of compliance (eg license condition 22, which covers modification to existing plant), which contribute most to the licensee's safety management performance, and the prevention of significant nuclear events; and
- we will secure improvements in the quality of duty holder's safety submissions. To support this, the programme will clarify standards and expectations for its staff and duty holders on 'fit for purpose' safety cases, and also clarify what constitutes adequate licensee arrangements for producing safety cases. The revision of the Nuclear Safety Directorate's (NSD) Safety Assessment Principles will be completed and work started to revise the underpinning Technical Assessment Guides.

For further information see: [www.hse.gov.uk/nuclear/index.htm](http://www.hse.gov.uk/nuclear/index.htm)

## Offshore

26 The Offshore Programme continues to strive to improve health and safety standards by reducing risk in the offshore oil and gas sectors and diving industries. In 2006/07, key work streams include:

- continuing a key inspections project to inspect over 100 installations over three years, aimed at improving asset integrity and working with industry to develop an asset integrity tool kit;
- carrying out a structured inspection programme, targeting deck and drilling operations on all offshore installations to eliminate fatalities and reduce all other incidents from these activities by 20% from a 2001 benchmark, and to disseminate lessons learned to the industry;
- implementing the revised Offshore Installations Safety Case Regulations, to better target assessment resources and enhance approach to validation;
- working with industry and trade unions via Step Change in Safety and the Offshore Industry Advisory Committee to improve workforce involvement (including continued publication of HSE's newsletter for offshore 'Tea-shack News')

For further information see: [www.hse.gov.uk/offshore/index.htm](http://www.hse.gov.uk/offshore/index.htm)

## Onshore

27 The Onshore Chemical Industries Programme has developed a five-year strategy for health and safety in the chemical and associated major hazard industries. It sets out how to deliver the long-term aim of securing the health and safety of workers and members of the public by preventing major accidents and limiting the consequences of potential major accidents. Key work streams include:

- targeted intervention at the 1100 major hazard sites regulated under the Control of Major Accident Hazards (COMAH) Regulations;
- working with industry to develop Process Safety Performance Measures and incident precursor measures;
- devolving the planning tool, used presently by HSE during assessment of the potential consequences of land usage around major hazard sites, to local planning authorities;
- structured inspection/education programmes, at selected installations, on health issues such as dermatitis, legionella and asbestos.

28 HSE will deploy significant resources to investigating the December 2005 explosion and fire at the Buncefield oil storage depot. We will follow the inspection with appropriately targeted inspections and by promulgating the lessons learned.

29 The Onshore Specialised Industries Programme also continues to deliver priority interventions for the mining and open cast coal sector, the gas supply and major pipeline industries, explosives, and dangerous pathogens and genetically modified organisms.

For further information see: [www.hse.gov.uk/mining/index.htm](http://www.hse.gov.uk/mining/index.htm)  
[www.hse.gov.uk/gas/supply/index.htm](http://www.hse.gov.uk/gas/supply/index.htm)  
[www.hse.gov.uk/explosives/index.htm](http://www.hse.gov.uk/explosives/index.htm)  
[www.hse.gov.uk/biosafety/](http://www.hse.gov.uk/biosafety/)

## Major Hazards Cross-Cutting Programme

30 The Major Hazards Cross-Cutting Programme, developed last year, is designed to improve the consistency, efficiency and effectiveness of HSE's major hazards interventions. It identifies issues that cut across the major hazard sectors, where we can reduce the likelihood of catastrophic incidents by sharing, understanding and adopting best practice. During 2006/07, the programme's work will include:

- identifying the techniques, methods and approaches used in assessing human behaviour as a precursor to major accidents, and establishing best practice; and
- engaging more effectively with large organisations by contributing to the Large Organisation Partnership Pilot (LOPP).

## Strategic Enabling Programmes (StEPs)

31 The **Local Authorities and HSE Working Together Strategic Enabling Programme** aims to build a partnership which will make the best use of the respective strengths of HSE and the local authorities (LAs) in tackling national, regional and local priorities, and deliver the conventional health and safety PSA targets.

32 During 2006/07, the StEP will take the remaining steps needed to make HSE-LA joint planning of field activities a reality. We will build and sustain an enduring partnership by:

- implementing the agreed revised governance arrangements for the partnership nationally, regionally and locally, including the work of the 'Local Government Panel' (in routine dialogue with HSC), a reconstituted 'HELA', and regional partnership arrangements;
- providing better training, support and communication for and with LAs, directly linked to HSC's priorities and reflecting the needs of the Fit3 strategic programme;
- continuing to make science and technology funding available to LAs for new projects, and evaluating those already started;
- evaluating pilot work carried out on joint HSE/LA inspector authorisation in enforcement, with the aim of creating a flexible system and structure which allows joint resources to be used in the most effective manner;
- working with other regulators and local authorities to develop a more joined-up approach to describing priorities for LAs, and how regulatory outcomes can be measured to ensure continuous improvement of their delivery; and
- delivering HSC's priority initiatives by HSE's Partnership teams in the field, working with LAs to co-ordinate the various activities and elements of the partnership.

For further information see: [www.hse.gov.uk/lau/](http://www.hse.gov.uk/lau/)

33 HSE continues to promote appropriate management of health and safety as an integral part of effective business management. The **Business Involvement Strategic Enabling Programme** works to promote the business benefits of well-managed health and safety, greater corporate responsibility and accountability for health and safety, and better understanding of health and safety benefits in small businesses. The StEP's work for this year will include:

- delivering the benefits from a more customer focused approach being piloted through the Large Organisation Partnership Pilot (LOPP);
- further promoting corporate responsibility, director accountability and health and safety performance reporting through, for example, guidance and self-assessment/benchmarking tools;
- ensuring that small businesses have access to simple, easy to understand information and advice, from HSE publications and web material, and the Small Business Service's website.

For further information see: [www.hse.gov.uk/businesses.htm](http://www.hse.gov.uk/businesses.htm)

34 The **Worker Involvement Strategic Enabling Programme** will continue to secure more and better worker involvement in health and safety risk management by raising awareness, influencing attitudes and changing behaviours. This year, we plan to do this by:

- consulting on the most effective ways to stimulate better dialogue between workers and employers;
- publishing and promoting case studies giving practical examples of how organisations have introduced and improved worker involvement, in particular through HSE's delivery programmes; and
- administering the third (and final) annual round of the Worker Safety Adviser (WSA) Challenge Fund, evaluating the second round projects and disseminating emerging examples of good practice, and developing proposals for the future of the WSA initiative, implementing any ministerial decision.

For further information see: [www.hse.gov.uk/workers/index.htm](http://www.hse.gov.uk/workers/index.htm)

35 The **Enforcement Strategic Enabling Programme** will continue through 2006/07 to examine HSE's and LAs' formal enforcement activities and make proposals and implementation plans that will better enable HSE and LAs by:

- using enforcement to support the Fit3 SDP;
- investigating and prosecuting more efficiently and effectively;
- identifying, targeting and bringing 'rogue' traders to account;
- optimising and sustaining, through communications, the ripple and deterrent effect of these activities; and
- ensuring that the relevant programme proposals mesh with HSE's work to control major hazards.

## Essential underpinning work

36 The range of work described below is also vital to delivering the PSA, and HSE's long-term capability to discharge its duties (including regulation).

## Policy Programme

37 HSE will remain an exemplar of modern regulation. We will seek continuous improvement in our regime and with other regulators (eg on joint plans for interventions) to ensure resources are targeted on risk. Work streams that will impact on all of HSE's work in 2006/07 include:

- reviewing the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), to improve the focus and efficiency of information collection from the point of view of both HSE, LAs and duty holders;
- reducing the burden of providing data to HSE by cutting the number of forms, the amount of information required on forms and using modern technology to make it easier to send information to us;
- continuing the campaign to tackle excessive risk aversion, culminating in the promotion of a set of principles of sensible risk management and clear, effective guidance. The goal of the initiative is to help business:
  - manage risk sensibly, not try to eliminate it altogether; and
  - be able to undertake simpler, quicker, proportionate risk assessment;
- finalising, monitoring and reviewing the delivery of HSC/E's simplification plan, which aims to simplify legal duties in order to make it easier for business to understand how to comply with standards that protect workers and the public; and
- providing renewed impetus to ensure that the better regulation agenda is fully integrated into policy development.

38 The Policy Programme also plans interventions in specific areas, including:

- producing an expert report on the health and safety implications of the Energy Review to the Government by 30 June 2006;
- reviewing the gas safety regime;
- working with HSE's Major Hazards SDP and other government departments to present options to Ministers on issues surrounding societal risk and land use planning; and
- reviewing the COMAH charging regime.

## Communication

39 HSE continues to use communication activity as an intervention to deliver improved health and safety outcomes. We will build on the success of large-scale campaign activity in 2005/06, with two major campaigns aimed at reducing falls from height and bad backs. The campaigns will use TV, press, radio and online advertising media.

40 We will use communication campaigns on topics such as skin disease, asthma, asbestos, noise, vibration and the construction industry to support the Strategic Programmes' other activities. The range of interventions will include advertising campaigns, organised events, publications and interactive web and other online support. We will also use communication activity to support corporate and policy initiatives, including events for stakeholders, online consultations, and national awards for health and safety.

41 Engagement plans are in place for 25 key corporate stakeholders. We will review progress against these plans throughout the year with the HSE Board. We will also repeat a survey (originally run in January 2006) one year later to measure our impact. A programme of events aimed at MPs and Peers will include a new newsletter and receptions in Parliament. Additionally, HSC will undertake party conference activity.

42 The communications research programme will continue to deliver insights into the perceptions of key audiences, including employers, employees, citizens, MPs and key stakeholders. We plan to use the results from the 2005 staff survey to segment our internal audience to deliver more tailored communications to our own employees.

43 We will improve HSE's communications infrastructure by:

- putting all communication activity onto a more formal programme/project working basis in line with developments across HSE;
- restructuring our Press Office to increase capacity for proactive media relations;
- reviewing our regional media relations;
- developing our advice strategy to make information easier to access and use; and
- implementing online improvements identified in a web users' survey.

## Science and innovation

44 The HSC Science Strategy 2005-2008 sets out how HSE will apply high quality science to provide a sound evidence base to support delivery of the HSC vision and mission. Implementing this strategy will be a top priority for 2006/07. The Science Strategy sets out science priorities for the Strategic Programmes, some of which are still under development. HSE will continue to develop and refine science plans for all of its business activities. These plans will focus on delivering the PSA, but also address longer-term needs.

45 Managing the Fit3 programmes' performance will represent a major call on HSE's science budget during 2006/07. HSE will commission new surveys to track improvements in exposure to risk and in the control of risk relevant to the health and safety outcomes, injuries, ill health and days lost, that form the basis of HSE's contribution to the PSA.

46 The Office of Science and Technology's review of HSE's Science Strategy is scheduled to report during Spring 2006, and we will prepare an action plan to address its recommendations as a priority. This will include a new research management database, planned for Autumn 2006, to support simplified arrangements for commissioning and managing research and scientific support. HSE will increase opportunities for partnership working with key external stakeholders and will reintroduce its Competition of Ideas during 2006, by including invitations to address broad-based questions on risk and health issues.

47 Work to strengthen the strategic partnership between HSE and its in-house Health and Safety Laboratory (HSL) will continue during 2006/07. Key aims of the strategic partnership are to realise HSL's vision to be a world-class health and safety laboratory, and to ensure that this expertise is used to the best effect to support HSE's business objectives.

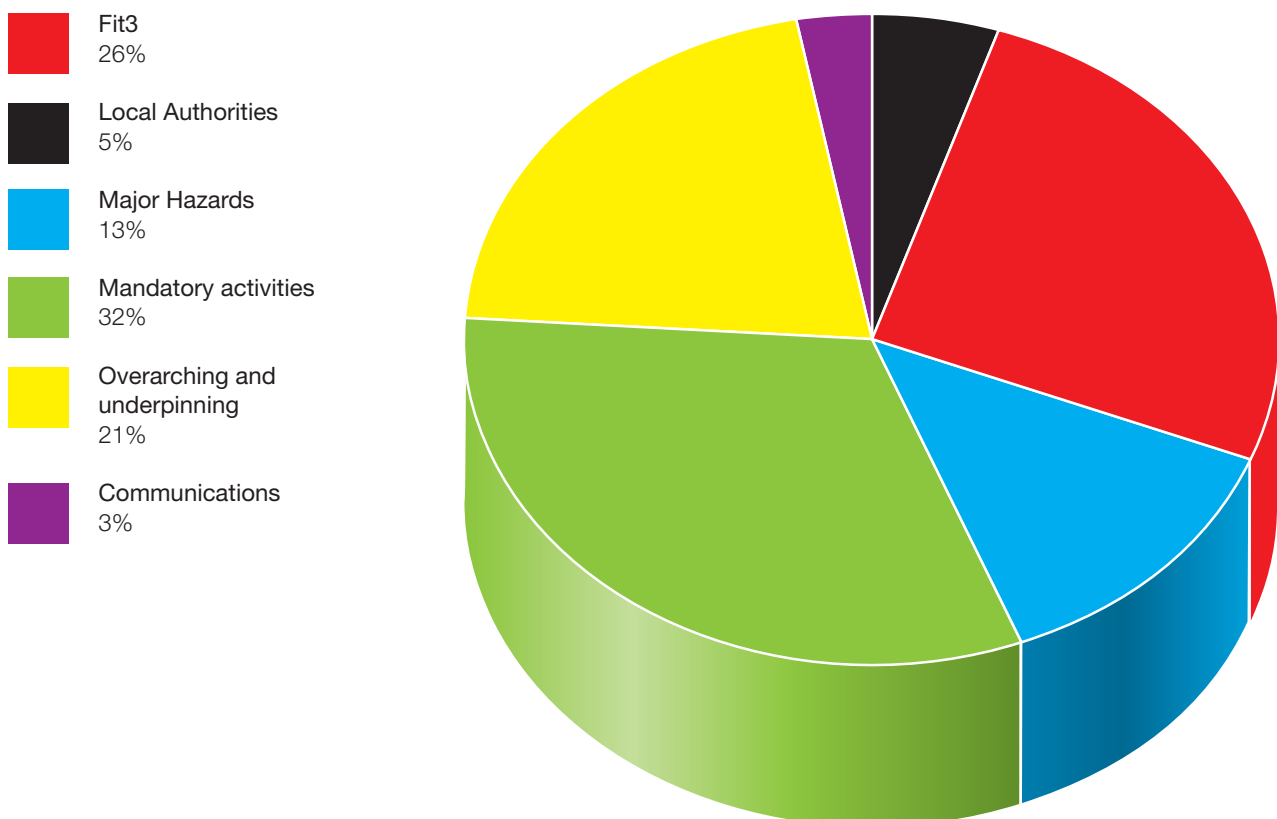
48 The proposed science budget for 2006/07 is approximately £40 million. The pie chart below represents an indicative allocation of resource based on bids presented to the Science Strategy Committee in December 2005. The Committee has not completed its consideration of the budget bids and will consider them further in June 2006, in conjunction with well-developed science plans.

49 The mandatory activities programme supports front line and regulatory work, and includes forensic support to investigations (and maintaining HSL's capability to provide this), and the production of guidance and standards.

50 The overarching and underpinning programme comprises cross-cutting interventions, statistics, evaluation, epidemiology, horizon scanning and work to support the Strategic Enabling Programmes.

51 HSE has agreed to make £5 million available to local authorities over a period of four years from April 2005, to investigate how they might make increased use of science, especially HSL's resources, to support their delivery. The allocation for 2006/07 is £2 million.

#### Proposed science budget allocation 2006/07



## Intelligence, statistics and economic analysis

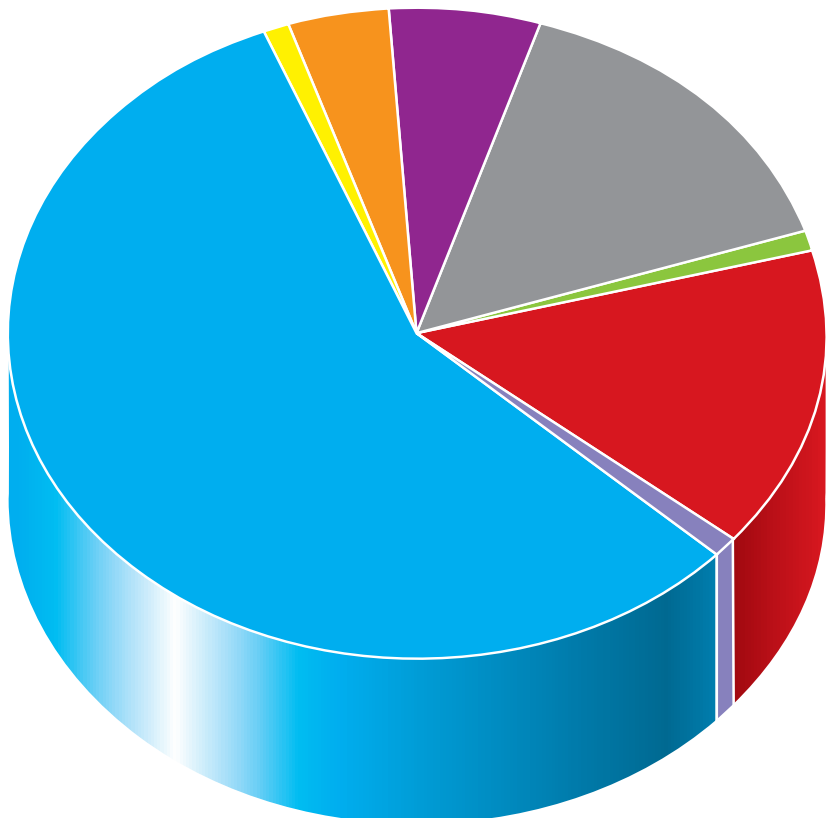
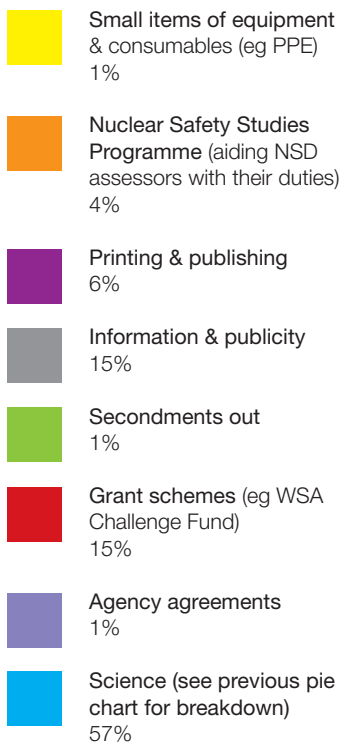
52 HSE analysts will work increasingly with counterparts in DWP and elsewhere in government to ensure that our policies and programmes support the wider employment and occupational health agenda. We will also be looking for increased co-operation in data gathering and sharing to help reduce burdens on employers, eg by limiting the need for separate surveys.

53 A small team of analysts are now working to help guide each Strategic Programme team through their planning, performance management and evaluation. The development of the evidence base for Fit3 is now well developed and by the end of 2006/07, this will also be the case for the Major Hazards SDP and Strategic Enabling Programmes.

54 We are analysing the first surveys in the Workplace Health and Safety Survey 'family' to give us a fuller picture of how injuries and ill health are influenced by employer and employee knowledge of risks, attitudes, behaviour and actions required. This will provide programme teams with valuable management information, and stakeholders with assurance of our progress toward the PSA on improvement in the control of risks in the workplace.

55 HSE's epidemiology group is leading a review of the estimated proportion of cancer cases due to occupational exposure. We believe it is now appropriate and

### Proposed programme budget allocation 2006/07



feasible to re-examine the evidence for the current estimate.<sup>4</sup> We will work with both UK and international experts in the field and aim to publish the findings in time for discussion at a stakeholder workshop in 2007.

## Resources and efficiency

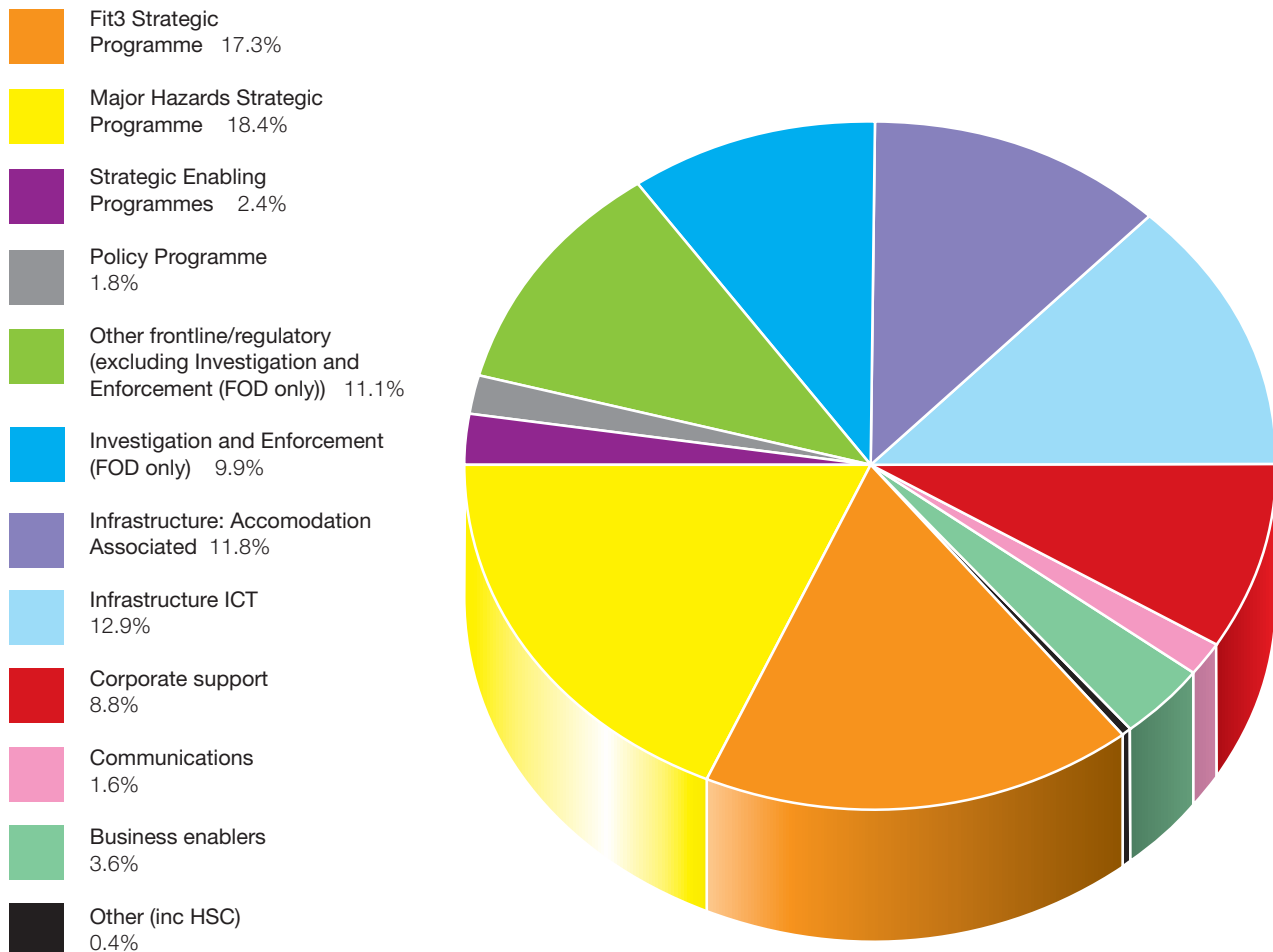
56 The budget allocated for HSE (excluding HSL) for the year 2006/07 is:

<i>£ millions</i>	<i>2006/07 allocation</i>
Admin (gross)	222.6
Programme (gross)	73.1
<b>Total Expenditure</b>	<b>295.7</b>
Income	(52.9)
<b>Net Resources</b>	<b>242.8</b>
Capital	18.2

The above figures exclude the costs of rail safety regulation, in view of the transfer of responsibility to the Office of Rail Regulation with effect from 1 April 2006.

4 Doll R and Peto R *The Causes of Cancer: Quantitative estimates of avoidable risks of cancer in the United States today* Oxford University Press 1981 ISBN 0 19 261359 6

### Proposed admin budget (excluding admin other) allocation 2006/07



57 HSE has set an efficiency target of £50 million for 2005/06-2007/08. For 2006/07, major activities will include:

- transforming HR service delivery;
- implementing a new Corporate Operational Information System (COIN);
- increasing front line delivery; and
- improving our management of information.

## Freedom of Information

58 The Freedom of Information Act 2000 came fully into force on 1 January 2005, placing additional duties on HSE by creating a right of access to official information. Statistics for the implementation of the Act in Central Government show that among government bodies, HSE receives by far the most requests for non-routine information.

59 HSC/E is an open and transparent organisation. We publish detailed information on all aspects of health and safety, including our plans and performance. You can see more detail on our plans, and how we perform, by looking at our website: [www.hse.gov.uk/](http://www.hse.gov.uk/)