Worker involvement in health and safety: what works?

A report to the HSE prepared by Howard Fidderman and Karen McDonnell on behalf of the Royal Society for the Prevention of Accidents (RoSPA)

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PREFACE

In 2009, the HSE launched a new strategy following extensive consultation across GB. The events we organised in Scotland were oversubscribed and generated lots of ideas. Underlying the strategy is the call to all sections of society to "Be Part of the Solution" in improving workplace health and safety. This is because we, and our local authority partners, recognise that, as regulators, we cannot do it all ourselves. The workforce in each industry has a key role to play and "worker involvement" is one of the strategy’s goals: specifically, to reinforce the promotion of worker involvement and consultation in health and safety matters throughout unionised and non-unionised workplaces of all sizes.

We have set this goal simply because the evidence suggests that involving workers has a positive effect on health and safety performance. But what is worker involvement and what does it look like in practice, particularly where there is no trade union to structure and support it? To try and answer these critical questions, the HSE in Scotland was delighted to be able engage RoSPA in a project to find out “What works in worker involvement?”

This report presents the findings from open and honest discussion with a diverse range of businesses as well as detailed case studies. It offers the HSE valuable material to promote the benefits of worker involvement, which – as can be inferred from these stories – go much wider than health and safety. This complements the work we are currently doing to promote worker involvement through subsidised training (“Safe and Sound at Work – Do Your Bit”). Critically, it offers useful insights into how businesses that have yet to reap the rewards may go about introducing the right culture without bureaucracy or huge cost.

The next step for us will be to use this work to help more businesses develop a relationship with their workforces based on trust, respect and cooperation – all pre-requisites for the prevention of ill health and injury at work.

Dr Paul Stollard

HSE Director Scotland
I. INTRODUCTION

Worker involvement in health and safety is a key theme of the HSE’s strategy for the UK’s health and safety system, *Be part of the solution*. The strategy, which was launched in 2009, recognises that the way forward for the health and safety system is for the HSE to work in partnership with stakeholders. Engaging with the workforce on health and safety-related issues – irrespective of the sphere of activity – is fundamental to the success of the strategy.

In 2009, HSE FOD Scotland engaged RoSPA to undertake an investigation of worker involvement in health and safety within non-unionised workplaces in Scotland. The initiative builds on the evidence from research conducted by the HSE and others that organisations with “properly involved” unionised safety representatives achieved better health and safety performance than those without such representation. It also builds on the wider emerging employee engagement agenda in which positive relationships between employers and employees, and indeed between employees themselves, are key to improving productivity and enhancing working lives.

RoSPA conducted survey work and focus groups with a diverse range of organisations drawn from health and safety business networks in Scotland to help develop a self-sustaining “what works in worker involvement” toolkit. Linking to the HSE’s strategy, the investigation sought to identify examples of genuine management/workforce partnership based on trust, respect and cooperation, recognising that with such a partnership, a culture can evolve in which health and safety problems can be solved jointly and in which concerns, ideas and solutions are freely shared and acted upon.

This approach ensured that the RoSPA initiative was underpinned by core HSE messages promulgating the positive benefits of worker involvement, signposting relevant case studies, publications and sources of advice. Threads from the recently revised HSE worker involvement website and the HSE’s “Safe and sound: do your bit campaign”, and key messages from the MacLeod review of employee engagement, have also been embedded in our attempt to identify leading edge worker involvement initiatives in non-unionised workforces.

This report describes the background to this challenge, sets out and discusses main findings from the investigation and proposes “next steps” for helping organisations recognise the benefits of effective worker involvement and how to go about improving their own practices.

RoSPA is grateful to all those who contributed to this investigation through participation in focus groups and survey work. We would like to take this opportunity to express, in particular, our heartfelt thanks to the individuals who participated in the four case studies: Duncan McNicol at CBES, Jonathan Neale at Highland Spring, Karen Gray and Jim Bradley at Livingston Designer Outlet, and Alan Galloway at Timbmet. All four were incredibly generous with their time and kindness, as well as their willingness to share openly and honestly their experiences around worker engagement.

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2. A BACKGROUND TO WORKER INVOLVEMENT

The HSE’s strategy for the health and safety system of the UK talks of “genuine management workforce partnership based on trust, respect and cooperation” and “the combined involvement of management and health and safety representatives in inspections, investigations and risk assessments”. While such cooperation may exist in well-run businesses with active safety representatives appointed by trades unions under the Safety Representatives and Safety Committees Regulations 1977, RoSPA’s experience suggests there are few representatives of employee safety (RESSs) elected in non-unionised workplaces – despite the availability of this “democratic” option to employers under the Health and Safety (Consultation with Employees) Regulations 1996. It is RoSPA’s opinion that real progress in relation to worker involvement will be made through facilitating a participative approach to worker involvement and sharing success as opposed to an approach that relies on invoking the 1996 Regulations.

Although trade unions insist the 1977 Regulations are the best path for consultation, the percentage of workplaces where unions are recognised has declined markedly since the 1970s, which means that the 1977 Regulations are irrelevant in these workplaces. Our research shows also that beneficial worker involvement in health and safety is perfectly feasible in non-unionised workplaces, although in most cases it is likely to follow the employer’s agenda and be confined to the implementation end of the spectrum rather than anything approaching joint planning and collaborative decision-making. (Union safety representatives are much more likely to be empowered to set agendas and be challenging.)

The HSE, because of its regulatory role, has tended to focus on promoting employers’ duties to consult, although this has been more a matter of persuasion and aspiration than formal enforcement. Although this provides a platform for employers to develop wider employee involvement, it is also now clear the current economic climate requires employers to have a clearly identified path to worker involvement that is linked to their existing business framework.

Since the late 1990s, HSE-commissioned research linked to worker involvement has sought to tease out some of the issues and explore potential barriers to strengthening and extending worker involvement in day-to-day health and safety management, creating a foundation for further engaging workers on bigger questions via more structured consultation. Seeking to build on one of the cornerstones of successful health and safety management – namely “the establishment and maintenance of control” – and the observation made within HSG65 that organisations that perform well commercially often excel at managing health and safety, the HSE engaged the Keil Centre to explore the safety implications of self-managed teams. The background to this research – an international review of employee involvement – stated that self-managed work teams (SMTs) were one of the most effective employee involvement techniques for fostering organisational success through improved quality, productivity and employee attitudes. As with other business-related research, however (including, most recently, the MacLeod review), SMT literature tended not to link safety-related topics to the employee involvement equation.

The Keil Centre’s own survey work, however, identified numerous examples of how SMTs had led to improved employee involvement in health and safety and that it was evident that SMTs could be implemented in safety-critical industries without

compromising health and safety, although they will only deliver results if: they are applied to appropriate tasks; the team is designed to enhance the performance of that task; and implementation is planned and thoroughly applied at the appropriate pace. The research identified the potential for focussed team-based activity linked to safety-related topics, a thread that has been developed in the “Safe and sound: do your bit” campaign.

**Worker Safety Advisers**

The HSE has explored the concept of worker safety advisers (WSAs) as a further innovation linked to the worker involvement agenda. WSAs – essentially “roving safety representatives” – have been used successfully in a number of countries to develop worker involvement in organisations that lacked formal arrangements for managing health and safety. The WSA challenge fund aimed to encourage partnerships within and between workplaces that would foster conditions in which workers would become willing to get involved and be consulted on health and safety issues.

The WSA challenge fund evaluation found the scheme had a positive impact on worker involvement and health and safety: the most commonly cited benefits were that awareness had been raised among employers and better channels of communication opened. For example, health and safety was more likely to be a standard item on the agenda at staff meetings and, in addition, health and safety committees had been established.

From a core health and safety standpoint, employers and workers both stated that risk assessments were now more formalised and conducted more frequently. Evidence therefore strongly suggested that the WSA intervention was positive and recommended that a follow-up survey be completed to identify further legacies from the initiative. To date this has not been undertaken.

In parallel with the WSA pilot, and with a view to increasing the willingness and confidence of employees in organisations that do not recognise unions to “get involved” in health and safety, the HSE commissioned research to identify obstacles to such involvement. The recommendations from this report are illuminating and are developed in the RoSPA initiative.

The CFS report noted that removing “obstacles” to worker involvement entails cultural change within organisations that is, in essence, a long-term goal. Nevertheless, developing initiatives that work with, rather than against, the culture of particular trades and occupations, especially where this is “macho”, would be of benefit. Of help here would be the development of case studies showing the business benefits of good practice that include examples of smaller, non-unionised organisations and as many different types of business as possible, thereby making the information directly relevant: health and safety information that cannot be immediately recognisable as relevant to specific circumstances is often discounted.

Glasgow Caledonian University undertook sector-specific research linked to the Worker Engagement Project that comprised part of the HSE construction division’s work programme for 2005/06. This research explored whether

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approaches to worker engagement could be developed for the construction industry that would secure improved performance in a cost-effective manner. The objectives for the study were to: define and develop approaches to worker engagement appropriate for construction; evaluate these approaches; test their effectiveness on real projects; determine their impact on occupational health and safety performance and worker perceptions; and assess the impact of management structure and processes on the viability of these approaches. Before and after measures of worker perceptions, combined with qualitative interviews, helped identify approaches that successfully improve workers’ perceptions of worker engagement and the health and safety performance of management. Informal methods of engagement were more successful than written approaches and investment in formal health and safety training resulted in more meaningful discussions. The report recommended further research in relation to developing tools to measure worker engagement and the impact of foreign language speaking workers in the construction sector.

A strategic approach to “single issue” health and safety education, with the HSE working in partnership with safety representatives, was explored through HSE-commissioned research in 2007 (10). This research, promoting the use of the Manual Handling Assessment Chart (MAC) Tool through union safety representative training, identified the potential of seeding information into organisations through “trusted” individuals with the appropriate skill set, which might include being: recognised within the business; linked to the organisational structure and the health and safety management system; equipped with the technical understanding to deliver the message; and couched with people skills to ensure others take ownership of information that directly influences their health and safety.

In 2009, the Institute of Occupational Medicine (IoM) published an evaluation of the Safety Development Advisors’ roles within the Scottish Centre for Healthy Working Lives. The SDA initiative targeted SMEs within the voluntary sector, retail hospitality, migrant and ethnic minority employers and Scottish Enterprise contacts, primarily within the central belt of Scotland. The aim of the initiative was to develop active worker involvement in health and safety, building on a model developed by the STUC and its partners. The response to the project from its target audience was, however, disappointing. The key reasons for organisations not taking part were lack of resources, time and finance. While there were no costs associated with the provision of SDA support, it is possible that organisations nonetheless anticipated increased costs to put interventions in place following their involvement. The lessons learned from this project were taken into account when forming the research proposal for the HSEFOD/RoSPA programme.

**Soft skills**

As the worker involvement agenda has developed, the importance of the role of the “messenger” has become more significant. Later HSE research around this theme has therefore looked at “people” skills and how these might be applied to secure improved worker involvement in health and safety. Fundamental to the emerging theme of worker involvement is research undertaken in 2007 by the Involvement and Participation Association (IPA), based on the underpinning principle that “workers should be involved in taking decisions about health and safety at work” and the key message from the WSA

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evaluation that “soft or people skills” are fundamental in engagement between employers and employees and indeed between employees themselves. The overwhelming conclusion of this study was that the creation of a “dialogue culture” was the most important factor in an organisation’s ability to develop and deploy the soft skills needed for effective employee involvement in health and safety. In essence a “dialogue culture” comprises an array of elements relating to the awareness of critical issues in the organisation and conduct of work, the modelling and demonstrating of appropriate behaviours by the organisation’s leaders, and the organisation of work around problem-solving and task participation by all employees.

Recent developments

A paper by HSE officials to the HSE Board in 2009 aimed to advance the understanding of the worker involvement agenda and respond to HSE evidence that high levels of employee consultation are associated with lower levels of injuries, near misses and stress and MSD symptoms. The paper noted that, although nine in 10 employers state they involve their employees in the management of health and safety, only four in 10 achieve what the HSE deems to be good practice. In addition, employees perceive that consultation on health and safety has weakened since 2006.

The HSE convened a workshop in July 2009 that brought together key stakeholders in discussions about an array of ideas for worker involvement strategy delivery. The workshop drew on the IPA’s 2007 research to identify the best methods for reaching the target audience, i.e., non-unionised and small organisations.

Key outputs from the workshop, which were used to develop the focus group content for the HSE FOD Scotland/RoSPA research, considered:

• “What are soft skills and how would you define them?” Hard skills and technical skills are those required to help get the job done; soft skills are seen as “people skills” needed to help things run smoothly. Soft skills include the ability to be a team player, influence others, distinguish key issues from the mundane, and be an effective listener.

• “What do organisations see as key soft skills for health and safety representatives to carry out their duties effectively?” Soft skills were identified as communication, trust, honesty, pragmatism, analytical and evaluation skills. Soft skills, however, are insufficient in isolation, and effective health and safety representatives also require “hard” skills, i.e., the technical competence to fulfil their role and undertake investigation. A further category of “firm” skills was also identified, which incorporated organisational/planning skills, the ability to be systematic and to recognise other people’s perspectives.

Beyond health and safety

In addition to health and safety-specific research, the MacLeod Review has provided an insight into the potential benefits of employee engagement in general for companies, organisations and individual employees. Of particular interest were conclusions around whether wider engagement could help the UK come through the recession and meet the challenges of

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15 See footnote 3.
a global economy, by having a positive impact on workplace performance. The review identified many positive examples of where engagement had improved both productivity and profitability, including testaments from individual employees.

As the introduction to the MacLeod review states: ‘If employee engagement and the principles that lie behind it were more widely understood, if the potential that resides in the country’s workforce was more fully unleashed, we could see a step change in workplace performance and employee wellbeing, for the considerable benefit of UK plc.’

To encourage those organisations and individuals involved in the HSE FOD Scotland/RoSPA research to view worker involvement in its widest possible context, and to encourage them to think outwith traditional health and safety boundaries in relation to the topic, we embedded the MacLeod review themes, along with those from the IPA and HSE work, in the focus groups.
3. METHODOLOGY

With worker involvement in health and safety (WISH) a key theme in the HSE’s 2009 strategy, HSE Scotland asked RoSPA: to undertake an investigation into the extent of WISH in non-unionised workplaces in Scotland; to provide a small number of detailed case studies of good practice from which other organisations might be able to learn; and to make recommendations as to how WISH might be enhanced. To do this, RoSPA embarked on a three-stage process:

1. In summer and autumn 2009, RoSPA contacted a list of 240 named individuals to ask them to complete a telephone questionnaire survey on worker involvement. The aim of the questionnaire was twofold: to identify non-unionised workplaces that were interested in WISH; and to provide background information. The results of the questionnaire are set out in appendix 9 and a copy of the questionnaire is reproduced at appendix 10. The list comprised RoSPA award winners, members, congress delegates and key contacts in Scotland. The availability of the questionnaire was also raised through the Scottish Centre for Healthy Working Lives (SCHWL). RoSPA made three attempts to contact potential participants before excluding them from the survey. The telephone survey resulted in 73 completed questionnaires (one of which was completed electronically by the participant). Of these, 40 also expressed an interest in attending one of the WISH events below; although they were sent individual invitations, only a handful attended.

2. RoSPA then held eight workshops in four days in Aberdeen, Stirling, Edinburgh and Glasgow between 30 November and 3 December 2009. Around 100 people attended. Each workshop was divided into three tables covering: from involvement to engagement; soft skills; and consultation and joint decision-making. Participants were rotated between the tables in groups of between two and six, spending between 20 and 60 minutes at each table. In each session, the table leader introduced the subject and then asked each participant a series of questions before facilitating a discussion among the participants. A summary of the main findings of the workshops is included at appendix 5, and notes from each of the three tables are reproduced at appendices 6, 7 and 8.

3. On the basis of the workshops, RoSPA asked four organisations to participate in good practice case studies. These were prepared on the basis of: the participants’ contributions at the workshops and, where appropriate, their answers to the questionnaire; an internet search; a site visit and interview with key personnel (one interview was conducted by telephone and email); and further conversations on the telephone and by email. The main points of each case study are summarised in chapters 4–7. The full case studies are included, in alphabetical order, as appendices 1, 2, 3 and 4.
4. THE MAIN FINDINGS

We set out below the significant findings to emerge from the four days of workshops and the relevant parts of the questionnaire.

1. The extent of worker involvement in safety and health (WISH) in non-unionised participant organisations is determined in part by organisation size, sector, history, location, culture and parent companies and in part, by human drivers, notably from senior managers and an individual manager who not only understands the need to engage all levels of the workforce in occupational safety and health (OSH) but has the commitment and skill to implement it.

2. WISH, as a concept, is low down on the agendas of most of the employers; there is little willingness to invest money and resources in WI. Most employers, however, will involve some workers in day-to-day activities that they often do not think of as involvement, for example toolbox talks.

3. Positive WISH is perfectly feasible, and is happening, in some non-unionised workplaces, but is likely to follow the employer’s agenda and be confined to the involvement/consultation end of the spectrum, rather than anything approaching joint decision-making (ie unionised safety reps are more likely to be empowered to set an agenda and be challenging). Employers who had encouraged representatives to be “forthright” reported better results.

4. Most consultation is similarly at the sharp end, for example around machine guarding and PPE selection, although the process tends to be ad hoc. There is, however, some evidence of consultation – formal and informal – in a minority of companies that facilitates decision-making, even if not all participants would define it as such. There is widespread eliciting of views on an informal and “walk round” one-to-one basis, although the participants did not generally group this with other types of consultation (which they tended to interpret in a formal sense).

5. Formal and fuller consultation was, unsurprisingly, most developed where some workers were represented by recognised trade unions and those unions were active. There was also some evidence of enhanced consultation and expectations where there was previous knowledge of, or contact with, positive union involvement.

6. There is some very good practice in around 10% of the participating organisations, with a further 20%–30% doing something positive. Most of the remainder claims they are, in principle, interested in involving their workforce to some extent, but appear to have little idea where to start.

7. Without an individual who constantly drives WISH – to the board, managerial colleagues, employees and contractors – strategic involvement is unlikely to take place to any significant extent. The driver is most likely to be the person who has day-to-day responsibility for health and safety (usually the safety practitioner or manager but, where no such post exists, the facilities of HR manager).

8. WISH needs the support of the MD or a senior director. Ideally that support should be proactive but it does not need to be excessive, although it must not be undermining or indifferent. There were also examples of “working round”, or engaging, disinterested directors. The support from directors and senior managers needs to be visible and communicated to the workforce. Senior managers should also practice what they preach.
9. Initially, WISH must be sold to directors and managers – a significant minority of participants questioned whether there was a genuine desire for WISH among managers and directors, regardless of their words. They believe it should be sold as something that is integral to the way the companies run their business and to good decision-making and success. WISH cannot be sold merely as a legal obligation or even because it improves safety, although the latter remains an important part of the message. If it is sold as a “bolt-on”, it will fall by the wayside (particularly in a recession). These organisations do not have the time and resources to indulge in WISH just for the sake of it or because it is a vague and unenforced legal requirement.

10. A minority also questioned whether WISH was important as an issue for many employees – particularly where there was pressure to meet targets and bonuses were involved.

11. There is a need to look at, and explain, not just what is being consulted on, but why the company is consulting. Linked to this, participants believed that there is a lack of convincing information and case studies on the “why” and that the business case for consultation and joint decision-making needed significant improvements if it were to convince senior management.

12. Many of those who enjoyed a degree of successful consultation emphasised that it takes time to get going and even longer to realise some clear benefits (typically three to five years).

13. Benefits of WISH are hard to prove and usually arise from a wider approach that includes WI. They are, however, undoubtedly present, including increased near-miss reporting and improvements to health and safety, helping staff through the recession (limited evidence), reduced injury and absence data and improved morale. The companies that have involved their workers in a meaningful sense speak positively about the experience and are often looking to expand upon it.

14. Most OSH consultation appeared to be a discrete activity, ie it was not usually integrated into wider HR activities, even in smaller organisations. Conversely, there was a good deal of support for approaching OSH engagement within a wider HR framework.

15. Although a majority of participants professed to know of one or both of the sets of Regulations governing consulting with either union-appointed safety reps or employees/representatives of employee safety (RESS) in non-unionised workplaces, few appeared to know what they require and fewer still are likely to be in compliance with the latter. Despite affecting only a minority of the workshop participants, the Safety Representatives and Safety Committees Regulations 1977 appeared to be far better known than the Health and Safety (Consultation with Employees) Regulations 1996 – even in non-unionised workplaces.

16. Where employees make suggestions or raised concerns, there is unanimity around the importance of being seen to take the comments seriously, understand them and try to address them. Some participants said that it was also important to address them successfully, but others believed the process, rather than the outcome, was of paramount importance. There is also unanimity that feedback is vital following consultation or suggestions, although not all participants appeared to do this.
17. There are generational issues: put starkly, a number of participants cited the problems of engaging a cynical old guard whereas they found younger workers more receptive to modern concepts of culture and involvement. Several, however, went on to say that the best results arose if they could bring on board one of the old guard, because they are informal leaders/opinion formers.

18. A significant number of participants believed the level of “engagement” was greatest between shop floor workers and decreased progressively up the management chain.

19. There was a consensus that the “approachability” of first line supervisors and an “open door” is important for eliciting the views of employees.

20. Experiential learning is the preferred route to obtaining maximum understanding, with a focus on the experiences of those who have had or witnessed accidents.

21. Although companies reported different barriers to WI, the most commonly cited were lack of resources, knowledge, time and imperative. Other barriers mentioned by a significant number of participants were: fear of managers; lack of respect shown by managers; transient workforces; remote and peripatetic workers; and cultural attitudes within the workplace, local communities and wider society.

22. The participants that had attempted to engage their workforce cited the most common barrier as line management; many said they would appreciate help with how to address line managers. Others highlighted supervisors and site managers as the most important people in the engagement chain.

23. Participants believed there was a significant need for training in, and the attainment of, “soft skills”, even though the term itself was not initially well recognised. There was also a consensus that the use of soft skills underpinned the transformation of the workforce from one that is “involved” to “engaged”, and that the use of soft skills could make the difference between a “good” manager and a “bad” one. Most companies were using soft skills to some extent, but not formally or strategically; nor had they recognised the added value that the application of these skills could bring.

24. The supply chain and “pre-qualification” criteria for tendering would be important if more clients insisted on WISH as something they wanted to see.

25. The impact of the local community and the location itself can be important, alongside the more obvious influences such as the industry norm and competitor practice.

26. Several participants said they would be interested in seeing how other participants had dealt with consultation.

27. Most representatives in non-unionised workplaces had a small amount of training (usually between two hours and one day). There were examples of significantly greater amounts of training, as there were of no training whatsoever. Very few participants thought their representatives had been trained in how to be a representative.
5. POINTS FOR THE HSE TO CONSIDER

The interviews and workshops elicited a number of issues that are directly relevant to the HSE:

1. Complicated models and splitting hairs over types of involvement, engagement, participation, consultation and join decision-making etc mean little to the firms we met. Most just see the issue, if they think about it at all, as “getting their staff involved” in some way or another. Nobody thinks “how should I involve my workers” as an academic concept. A manager might, however, think “Bill on the saw machine might have something useful to say on that”.

2. Most of those participants who had used the pre-March 2010 HSE website guidance (from involvement to joint decision-making) said it was moderately helpful. A far greater number had either not seen the guidance or had glanced at it and decided it was not helpful, practical or relevant. A significant number said that the use of a continuum (from involvement to joint decision-making) made them feel either daunted or a failure (because they had so far to go on the journey). Few participants had seen the diagrams and models used by the HSE and others to illustrate worker engagement, involvement, participation and consultation. No participant indicated that they found these representations useful (some said they were confusing or incomprehensible).

3. Nearly all participants would welcome assistance with WI, encompassing everything from why they should do it to how. Participants would particularly welcome guidance on persuading line managers and supervisors of the need for WISH and on how to go about it.

4. Linked to points two and three above, most participants wanted more practical information on the business case for WI.

5. The participants believe strongly that guidance from the HSE should start with the reasons why employers should involve workers, then provide examples and advice on how to do it.

6. Guidance should emphasise the importance of ascertaining the views of the workforce, for example through anonymous surveys. This should also be done to monitor the effects of WISH initiatives; a significant number of participants mentioned their “surprise” at some of the findings of surveys, for example verbal management commitment to WISH did not always feed down to the shopfloor.

7. It is worth considering explicitly linking advice on WISH to the recession.

8. The ability both to see case studies of good practice and to contact “mentors” from companies that have achieved success with WISH is important. In this sense, some kind of forum or database of willing mentors would be worth considering.

9. Most participants were emphatic that “If it costs money, forget it”. In this sense, the chance to receive free training and/or on-site advice might be highly welcomed, although it would still have to compete for the participants’ time.

10. Several participants mentioned, unprompted, that the HSE’s Hidden Killer asbestos campaign had elicited significant response from the workforces and heightened their interest in OSH.

12. A number of participants said that OSH trivia, and its portrayal in the media, is getting in the way of persuading workers and directors to take OSH seriously.
6. TIPS ON ENGAGING WORKERS

1. Be patient. The process of engaging workers takes time; those that have done it say that while there were some results within a year, it was nearer five years before they were happy that the process was embedded. Nor is the process of WISH ever complete.

2. Make sure the directors and senior managers visibly support a worker involvement culture. They can do this by addressing meetings, sending out messages, instructing managers, and “talking the talk and walking the walk” etc.

3. Explain why you want to involve workers and what it involves.

4. Run an employee opinion survey and be seen to act rapidly on a couple of suggestions or shortcomings. That way, employees will start to appreciate that the employer is serious about WI.

5. When receiving suggestions, always ensure that the person making the suggestion receives feedback, even if the answer is “sorry and these are the reasons why”. The fact that the employee’s views are treated seriously is usually more important than agreeing with them. Linked to this, ensure that you publicise responses to employees’ suggestions.

6. You need to engage personnel at all levels of an organisation, using different tactics for different groups and even individuals. For example, email might elicit suggestions from office-based workers, but may be less appropriate in a warehouse. There were, however, fascinating examples such as steel-encased PC kiosks on the factory floor that combined processes, holiday forms, emails and WISH in health and safety.

7. Be visible. Walk around. Talk to staff. Take small numbers of staff on regular safety walk rounds.

8. An anonymised system of reporting complaints or problems is helpful in the initial stages of embracing WI, but appears to be rarely used once the culture is embedded.

9. Ensure you take the views of shiftworkers and part-timers into account.

10. Take staff to another organisation where WISH is working.

11. WISH will not happen without a genuine no-blame culture.

12. Ensure reps have training in how to be a representative (covering eliciting views, presenting a case, feeding back to colleagues) as well as in health and safety. Even in most of the best examples, there is no training in representation.

13. People are generally reluctant to volunteer as a representative of employee safety, and it may be worth having a quiet word with employees you think would do a good job. Vociferous and confident individuals will facilitate better engagement than “yes” people. “Informal leaders” – who workers already turn to for advice – may either make good representatives themselves or be important in lending credibility to the notion and practice of engagement. Consider also offering inducements and rewards – financial or otherwise.

14. Make sure that any joint health and safety committees have a workable balance of employee representatives and managers. Managers – particularly the most senior – should consider absenting themselves from part of a meeting in order to ensure that representatives are not intimidated from speaking out. This should not undermine the case for strong
leadership from the top, and the need for such temporary absence will diminish as representatives grow in experience and confidence.

15. Ensure your managers and staff are trained in soft skills as well as hard skills.
7. CBES CASE STUDY – SUMMARY

• CBES Ltd offers services in construction (principal contractor, main contractor, and sub-contractor), refrigeration design and installation, mechanical and electrical, security systems, food systems, risk management and facilities management. The company operates in sectors such as retail, health and education through six UK regional offices and has its head office in Glasgow. With around 400 employees, CBES, like other contractors, utilises an extensive supply chain to deliver projects.

• The company’s experiences of workforce engagement include:
  - a belief that an organisation needs “maturity” and certain safety “hardware” in place before it embarks on worker engagement;
  - engagement results in enhanced trust among the workforce;
  - cost-effective, timely and acceptable solutions to the selection of safety equipment such as gloves, glasses and footwear;
  - a conviction that informal engagement and personal relationships with the workforce are very important;
  - involvement of the managing director and board is important in showing the workforce that the company is serious about engagement;
  - employees “open up” if they are taken away from the work site to a more formal setting for training;
  - it is important to explain the reasons behind a decision, rather than saying merely “Don’t do this, do that”;
  - more than 1.3 million working hours without a reportable injury (between May 2009 and April 2010); and
  - as part of wider worker engagement initiatives, behavioural safety training has resulted in an increase in the number of near misses reported to more than 54% of total reported incidents in 2009 (almost twice the previous year’s proportion);

Engagement

• CBES is notable for eschewing traditional consultative and representative structures, preferring to use in-house training, as well as formal and informal on-site contacts, to engage its own employees and contractors’ staff in its efforts to improve health and safety.

• The role of directors is important: a number of directors have attended the IOSH Directing Safely course and health and safety leadership training delivered in partnership with Glasgow Caledonian University. The managing director (MD) and directors also conduct unannounced site tours during which they engage with the workforce via toolbox talks and general discussions on the walk round. The presence of the MD at the start of behavioural training courses helps the workforce gain an understanding of the company’s commitment to health and safety.

• The main ways in which CBES communicates information on health and safety to its employees and contractors are toolbox talks, inductions, formal training, notice boards, open door policy, safety alerts, posters and briefings. Consultation is conducted through formal training, briefings, safety workshops, and during audits and inspections. With contractors, the
main methods of consultation are formal training and pre- and post-contract review meetings.

• CBES conducts an annual employee survey, which includes questions around health and safety.

• Engagement has resulted in many benefits at the “sharp end” of the job. For example, feedback from an eight-week trial of different gloves increased the speed and effectiveness of the selection process as well as the employees’ buy-in when asked subsequently to wear the hand protection on sites. And, the number of hand injuries fell from 44 in 2006 to 10 in 2009.

• The main barrier that CBES had to overcome in order to engage workers was trust – avoiding the risk that engagement would be seen as “another safety fad if approached half heartedly”. It believes it is vital to approach engagement in an open and sincere manner and ensure that the workers feel valued and an important part of the delivery of the company’s objectives.

• Ongoing potential barriers to engagement can arise between line manager and supervisor level due to the pressure of the workload. Communication and explanation are vital to overcoming such barriers.

The CBES way

• Instead of safety committees and union safety representatives, all divisions of the business operate “health and safety implementation teams”, which comprise a division director, a member of the HSEQ team, project managers, employee representatives and industry experts. The teams discuss the practical implementation of the health and safety policy and delivery of the corporate and particular divisional objectives, and also ensure they are communicated to site operatives.

• CBES has found that the best means of engaging the workforce is through formal training sessions, where workers tend to open up. CBES attributes this to running the sessions offsite in a more formal classroom environment, which allows the trainers to give sufficient time and attention to the trainees, and provides a forum in which the workers can express their opinion and ask questions. One issue that workers raised during training concerned the need to sign off on risk assessments on every job and the sometimes generic nature of documentation. This allowed CBES to improve its own systems and roll out “dynamic” assessments with some departments.

• Over the past three years, CBES has undertaken over 1,000 days of training of contractors’ staff.

• CBES has run risk assessment engagement initiatives and competitions on the back of the European Safety Week. CBES “rebadged” the week to fit its own agenda as a “SAFE” (Site Assessment For Everyone) plan. This resulted in site-based teams developing their own job-specific risk assessments, with CBES rewarding the best plans. SAFE allowed CBES to convey the simplicity of risk assessment to its workers and to get them thinking about the assessment process.

• Engagement has improved CBES’s strategy for managing risk and afforded a better understanding of programme issues raised at site level by the site team and of what works best
8. HIGHLAND SPRING CASE STUDY – SUMMARY

• Highland Spring is the largest UK-based producer of natural source water in the UK. A family-owned business, based in the small village of Blackford in the Ochil Hills, Perthshire, the company reports an average annual turnover of £52m over the past three years. There are 289 employees at its Blackford site working in production, warehousing and the head office. There are no recognised trade unions within the company, although some employees are union members.

• In the past seven years, Highland Spring has implemented measures aimed at improving its management of health and safety at work; a large part of this has involved a re-energisation and restructuring of the representatives of employee safety (RESs) and the safety committee. The period has seen:
  - an enormous increase in the number of near misses that workers report and in the number of actions taken to address the issue raised;
  - a decrease in the number of reportable and minor injuries to a point where the RIDDOR rate is well below the average for a manufacturing site;
  - proof of a “direct correlation” of the above, ie the greater the number of near misses that are reported and fixed, the fewer the number of accidents on site;
  - the successful use of a competition to engage workers and encourage them to report near misses;
  - the safety representatives and committees contribute significantly to the development and implementation of policies and changes in procedure on the shop floor;
  - the workers no longer see the manager responsible for health and safety as “the lynch pin for getting things done on health and safety” – there is now engagement at all levels of the company;
  - an increase in workers’ awareness of health and safety and its relationship to the business;
  - the company engage its workers through the 5S workplace organisation technique (which covers quality and production), delivering clear business and safety improvements;
  - considerable strides towards a genuine no-blame culture;
  - the safety committee had an important input into machinery guarding, with the company investing £1/4 million;
  - there is now “peer pressure” to behave safely; and
  - a perception that employee relations are much improved.

Engagement

• Highland Spring uses “factory-proof PC kiosks” – self-standing stainless steel cases with a computer display screen in the middle and a robust metallic keyboard that can withstand factory and warehouse floor locations. There are around 20 kiosks on the site, in addition to the office PCs. The kiosks have eliminated paperwork, facilitated operator machinery checks, and offer an easy way to provide information – on safety and non-safety issues – to the workforce and also to elicit their views.
* Highland Spring has 10 representatives of employee safety (RESs) who sit on one of four monthly safety committees, two of which are at Blackford and two at other sites owned by the company. Until 2009, there was a single quarterly committee but it became too large to deliver the improvements that were needed. The four committees come together once a year at a conference where they showcase their work to Highland Spring’s chief executive and other senior managers as well as each other, and agree their action plans for the following year.

* The RESs carry out monthly inspections: they inspect their own area once a year and different areas 11 times a year.

* Every RES and operations member of staff has completed the Royal Environmental Health Institute of Scotland (REHIS) one-day “elementary” course in health and safety, and has received other specialist training from the company.

* The company consults and involves its RESs and the workforce on a wide range of issues, from the strategic to point of use, although the experiences have been more rewarding at the point-of-use end of the spectrum.

* The RESs are also encouraged, and given paid time off, to visit other companies.

**The Highland Spring way**

Highland Spring’s health and safety manager has an engineering background but subsequently completed a NEBOSH certificate and degree in health and safety management. He has used his experience and qualifications to cherry pick the most useful and relevant aspects of management systems and other sources of advice and information – not necessarily safety-specific – and integrate and tailor them into a practical approach for Highland Spring.

* Two years ago, the company changed from a chief executive who was “hands off” in terms of health and safety, preferring to leave it to a specialist, to one who insists on a monthly one-page report. The expectation in the business has always been that the workforce is safe and healthy, and behaves accordingly, but the new CE is more involved in the process.

* There is no board member for health and safety, but all the board have received health and safety training and each board meeting considers health and safety KPIs.

* The fact that the company is based in a small village, drawing many of its workers from nearby areas, combined with the presence of all the directors on the main site with the workforce, is a powerful factor in encouraging a sense of community within the company. This, in turn, appears to play a positive role in the approach at all levels of the company to health and safety.

* The health and safety manager’s experience is that engaging worker in health and safety must be “fun”, positive not negative and focus on “congratulating people for getting things right rather than penalising them for not doing things the correct way”.
9. LIVINGSTON DESIGNER OUTLET CASE STUDY – SUMMARY

• Livingston Designer Outlet is a shopping centre located in Livingston Town Centre, comprising 83 “tenant” shops offering discounted goods from well-known brands, as well as a multiplex cinema, health club, two pubs and restaurants. The centre attracts 6 million visitors a year. The hazards and risk are correspondingly varied: fire; slips, trips and falls involving shoppers and contractor staff; workplace transport and manual handling in the service yards; aggression and violence towards shopworkers; and alcohol-fuelled behaviour in and outside the pubs.

• The centre is managed by the McArthurGlen group, which has 18 other such outlets. In addition to 11 McArthurGlen employees, the centre has around 1,000 tenant staff and 55 contractor staff. Health and safety for the centre is the responsibility of the facilities manager.

• Livingston Designer Outlet is notable for the way in which it engages and trains the staff of its contractors, and for how it involves its tenants. The relationship with the contractors is such that many of their staff regard the centre as their de facto employer. This involvement, together with the engagement of McArthurGlen’s own staff, has resulted – either directly or indirectly – in:
  - contractor staff taking responsibility for, and acting on, health and safety issues;
  - specific improvements in areas such as car park lighting, manual handling in the service yard and a new lift for people with disabilities;
  - improved staff morale;
  - the tenants recognising and addressing their own health and safety responsibilities; and
  - an improving injury rate.

Engagement

• There are no recognised trade unions and no representatives of employee safety. Instead the centre consults its own staff on matters, including health and safety, through weekly staff meetings, and informs, and elicits the views of, the contractors and tenants through three committees, covering health and safety, environmental issues and general tenants’ issues, each of which meets every two months.

• The centre’s facilities manager has trained not just all his own staff, but also all of the contractors’ employees, to the British Safety Council’s level one qualification in health and safety.

• The centre’s e-learning package is available to the contractors’ staff as well as McArthurGlen employees.

• The training has empowered the contractors’ staff and given them the confidence to assess hazardous situations, such as this winter’s heavy snowfalls, and take appropriate action.

• Both the facilities manager and the centre administrator are committed to involving the centre’s workers, regardless of who their employer may be, and emphasise the benefits of their approach.
• The impetus to engage staff formally and systematically came from an audit by the British Safety Council and the centre's investigation into a single incident.

• The centre insists on evidence that its contractors have cascaded health and safety information to their staff.

**The Livingston way**

• The centre includes health and safety activity in the personal development plan of its own staff, which can result in a bonus.

• Health and safety issues are more likely to be raised at meetings and face-to-face rather than through the intranet.

• The centre trebled attendance at the tenants’ meeting by changing the format, splitting the meeting into three, and by deploying an imaginative use of carrot and stick in which it restricted the information that was most valued by the tenants’ head offices to the tenant managers that attended the meeting. They then explained to the head offices of non-attendees why they had not received the information.

• The rotation of some staff at meetings ensures that everyone is aware of health and safety and brings different skill sets and experiences to the meetings.

• The centre demonstrates a balance between centralised policies and local implementation and how a company can secure benefits by encouraging local staff to make suggestions that can be rolled out to the rest of the company.
10. TIMBMET SHIELDHALL CASE STUDY – SUMMARY

• Timbmet is a private sector company that imports, stores, machines, treats, sells and distributes timber and timber products. Timbmet has 400 employees, of whom 84 work at its Shieldhall site in Glasgow. Timbmet does not recognise trade unions for health and safety (or any other) purposes.

• In the past four years, the Shieldhall site has seen measures aimed at improving its health and safety culture, notably around communication and worker involvement and in empowering and supporting the health, safety and quality assurance (HSQA) manager. The site has benefited from:
  - a halving of reportable injuries over the past five years;
  - a decline in minor injuries;
  - the elimination of frequent causes of accidents;
  - an increase in the willingness of the workforce to report near misses;
  - an increase in workers’ awareness of health and safety and its relationship to the business;
  - low staff turnover;
  - a new safety committee structure representing all parts of the site;
  - all risk assessments and safe systems of work communicated verbally as tool box talks; and
  - a perception that it is easy to approach site and group managers about health, safety and welfare issues.

Engagement

• The main means of providing health and safety information to the workforce at the Shieldhall site are notice boards, toolbox talks and training. The company also produces a health and safety newsletter. It is important to tailor the means of communication to the nature of the job, for example emailing health and safety information is not helpful for yard workers without easy access to a computer.

• Formal consultation at the Shieldhall site is through a joint health and safety committee; there is no formal mechanism for consulting directly with the workforce individually, although toolbox talks do elicit views.

• The safety committee comprises managers and employee representatives. The representatives are volunteers and have not been elected. The past two years have seen the numbers of managerial representatives decline and employee representatives increase. The meetings no longer take place over lunch and have, as a result, become shorter and more focused. The meetings benefit from the presence of the site MD and group production manager, although they do not attend all meetings, in order to allow the representatives to discuss issues in their absence.

• There is a great deal of informal engagement on a one-to-one or team basis on issues that have an immediate bearing on the worker involved.

• Timbmet also has two health and safety forums at group level:
- a quarterly group meeting of the company’s two HSQA managers and the board member responsible for health and safety. This meeting deals with health and safety issues in a broader context; and

- an ad hoc health and safety awareness meeting comprising the same personnel as the quarterly meeting as well as marketing and HR representatives. This meeting was instigated by the group employee forum.

- Timbmet has conducted company-wide surveys of employees’ views on health and safety and on other issues. The Shieldhall site has carried out a health survey.

- The company has recently introduced suggestion boxes on all sites; the HSQA manager does not expect the Shieldhall box to yield a great deal because he believes he would hear suggestions in other ways.

**Human factors**

- The HSQA manager has driven the changes in the site’s approach to health and safety. He has spent nearly all his working life on the Shieldhall site and has extensive experience of most of the operations. This is an important factor in how he approaches health and safety in general and his relationships with the workforce in particular.

- The site MD has a close and long-term relationship with the HSQA manager. He pursues a supportive, questioning and non-interfering role.

- It is important to engage “Informal leaders” who, while reluctant to sit on committees, will nonetheless be instrumental in engaging the workforce more generally.

- The workforce and line managers are far more engaged in health and safety than four years ago, although the HSQA manager is emphatic that there is still some way to go. Many of the employees have been with the company a long time and, while this is highly beneficial overall, it can bring problems in terms of a resistance to cultural change.

- The safety committee representatives appear to enjoy their role and recognise the benefits of their participation.

**The Timbmet way**

- The HSQA manager emphasises the importance of keeping health and safety “visible” as part of the job of managers and workforce “all the time.”

- Worker involvement in health and safety is integrated into the production process, rather than an add-on. The emphasis is on “getting it done” rather than strict adherence to theoretical models and legal requirements of worker involvement (although the company has a clear understanding of its statutory consultation duties).

- Training for line managers and representatives remains a work in progress, although it looks set to benefit from a new group training plan.

- It is important to run initiatives that bear fruit – quite literally in the case of Timbmet’s healthy eating campaign.

- The HSQA manager believes that it is important to reward workers who engage fully in health and safety – put simply, if one activity increases a salary, and a second does not, which activity is a worker likely to opt for?
• Despite the presence of what appears to be a genuine no-blame culture, the employees need further education and encouragement to report near misses and hazards.

• The HSQA manager would welcome (free) assistance with training and the chance to look at how other businesses of a similar size – which is more important than the sector – have engaged their workforces.

• The impact of the recession on the business, and on issues such as health and safety and worker engagement, is significant.
7. RECOMMENDATIONS

1. WISH needs to be promoted as part of wider follow up to the Macleod review.

2. WISH needs to be integrated into wider HR strategies and practices in Scotland.

3. A set of senior champions should be recruited to publicise the health and safety and wider business benefits of WISH. The champion should also publicise the role of director leadership in setting expectations about the involvement of workers in the management of health and safety.

4. The HSE needs to simplify the terminology around worker involvement, engagement, consultation, participation etc. It should also evaluate at an early stage how appropriate and helpful its revised website is for organisations that are starting out on WISH.

5. The HSE should review all its guidance on WISH to ensure that it starts with the reasons why employers should involve workers, and then provide examples and advice on how to do it.

6. The HSE should actively encourage buddying between higher performers and those organisations anxious to enhance their approach to WISH.

7. A web-based alliance of businesses engaged in WISH and supportive intermediaries should be set up to generate more case studies and encourage B2B networking.

8. Key intermediary associations need to be encouraged to facilitate workforce consultation about the introduction of equipment, PPE, substances, technology, services etc by suppliers.

9. Key intermediary OSH influencers such as major clients have an important role to play in reviewing WISH with supply chain partners.

10. The HSE needs to inform workers that they have rights and responsibilities to contribute to OSH management, and reassure them that they will be protected from unfair discrimination.

11. There needs to be a much stronger focus on WISH in context of OSH management training and auditing.

12. A programme of soft skills training is needed to enhance overall skills needed for Visible Felt Leadership by managers and team leaders. (The HSE advises that the training offered as part of its “Do your bit” campaign” addresses the issue of “soft skills”.)

13. An online WISH review tool (“Where are you now?”) should be established with interactive links.

14. During visits to workplaces, the HSE needs to review progress by employers in adopting WISH.

15. A set of “how to” tools and techniques needs to be established to help organisations optimise their approach to workforce involvement through toolbox talks, “time outs”, point-of-work risk assessments, reporting/suggestions schemes, trials, team-based investigations etc.
16. As part of the review of its joint guidance with the Institute of Directors on health and safety, the HSE should ensure that the guidance is clear that directors must require a culture in which worker engagement is the norm and that they should lead by example.

17. The HSE should develop guidance on WISH specifically for line managers and supervisors.

18. The HSE needs to publish convincing case studies of how organisations have embedded WISH, the benefits they have secured and, importantly, the barriers they overcame and need to overcome. The HSE should consider publishing these in summary and full versions in order to convince sceptics.

19. The “Health Risks at Work – Do You Know Yours?” approach could provide a model for a new WISH toolkit based on the findings of this report and, in particular, the recommendations above. The toolkit avoid stating that there is any one correct or incorrect way to engage workers and should instead be adaptable to meet different business models and cultures, avoiding abstract theories in favour of practical suggestions.

20. A delivery method to disseminate and promote take up of such a WISH toolkit to businesses could be adapted from the “Health risks at work – do you know yours?” model. This might include organisations that have already registered an interest in the HSE’s “Do your bit” initiative, as well as organisations that have participated in this RoSPA research. The lessons of seeking a purely voluntary approach to securing an adequate number of delivery champions could be learned by recruiting paid agents.
APPENDIX 1: CBES CASE STUDY

CBES Ltd has eschewed traditional consultative and representative structures, preferring to use an extensive suite of in-house training, as well as formal and informal on-site contacts, to engage its own employees and contractors’ staff in its efforts to improve health and safety. The company’s experiences include:

• an extremely low rate of reportable injuries;

• increased near-miss reporting to more than 54% of total reported incidents;

• enhanced trust among the workforce;

• cost-effective, timely and acceptable solutions to the selection of safety equipment such as gloves, glasses and footwear;

• a belief that an organisation needs “maturity” and certain safety “hardware” in place before it embarks on worker engagement;

• involvement of the managing director and board is important in showing the workforce that the company is serious about engagement;

• employees “open up” if they are taken away from the work site to a more formal setting for training; and

• a competition that increased employee ownership and understanding of risk assessments.

CBES Ltd

CBES offers services in construction (principal contractor, main contractor, and sub-contractor), refrigeration design and installation, mechanical and electrical, security systems, food systems, risk management and facilities management. It operates across the UK in sectors such as retail, health and education, with a client list that includes ASDA, BP, Shell, Iceland, Scotmid, Somerfield, Centrica, NHS Greater Glasgow and other public and private sector companies. CBES is a subsidiary company of the City Refrigeration Holdings Group.

CBES operates through six regional offices and has its head office in Glasgow. With around 400 employees, CBES, like other contractors, utilises an extensive supply chain to deliver projects. The company has an accident frequency rate that compares favourably with the sector average, and in April 2010, it completed over 1.3 million working hours without a reportable injury (dating from May 2009).

This case study focuses on CBES’s north region, which stretches from the top of Scotland to as far south as the Lake District and across to Teeside. Duncan McNicol, who is the health and safety manager for the north region, has worked in the construction industry for almost 20 years – the past decade as a safety adviser and manager with CBES and, previously, as a roofer and manager and elsewhere. Duncan is supported by two staff and reports to CBES’s head of health, safety, environment & quality (HSEQ), Fraser Allan, who heads a team of eight personnel overall.

Duncan’s role encompasses supporting CBES’s site teams, undertaking audits and inspections, providing accredited health and safety training courses, supporting the delivery of the environmental management system, providing advice and information to third party clients, performing risk management surveys for clients, acting as CDM coordinator and
undertaking accident investigations. “There are never”, he says, “two days that are the same.”

The board

A number of CBES directors have attended the IOSH Directing Safely course and this was further supplemented by health and safety leadership training delivered in partnership with Glasgow Caledonian University. Heads of divisions communicate the importance of safety via implementation teams (see below); the managing director (MD) and directors also conduct unannounced site tours, including of shiftworks. These, Duncan believes, “give the directors a better snapshot of what is actually happening on site with regard to health and safety”. During the tours, directors engage with the workforce via toolbox talks and general discussions on the walk round.

The managing director and heads of division also deliver the opening to the behavioural safety training courses that CBES has been rolling out over the past 12 months. The course is designed to influence the culture of the site operations; the presence of the managing director, says Duncan, is important to helping attendees “gain an understanding of the commitment being shown by the business on this initiative and the need to ensure that everyone is aware of their responsibility to deliver safety on our sites. This is generally received well by employees attending the course as they have belief that the company is committed to preventing accidents and influencing the culture within the business.”

Implementation teams

CBES does not recognise any trade unions, although Duncan emphasises this is merely “the way it is” rather than because of any company policy. As a result, there are no union-appointed safety representatives. Instead of safety committees and union safety representatives, says Duncan, “all divisions of the business operate what we term health and safety implementation teams. These groups are chaired by the divisional heads and meet at least every four months in accordance with our management standards. The purpose of these teams is to discuss the practical implementation of the health and safety policy, delivery of the corporate and particular divisional objectives, and to discuss key health and safety issues relevant to the division and our employees. In essence they are fundamental to acting as a prime mover to continuous improvement within the business. The team also exists to ensure effective communication of the business and divisional objectives and initiatives to our operatives on site. Attendees at these meetings include the director of that division, a member of the HSEQ team, project managers, employee representatives and industry experts.”

Each implementation team formulates an action plan for the division that includes the implications of policies and procedures, organisational and divisional objectives, incident statistics, training and audit/inspection compliance. The progress of action plans are discussed and reviewed at these meetings to monitor delivery of the team’s objectives.

On site, project managers and site supervisors have responsibility for the implementation and monitoring of safety on their sites. This will include ownership to ensure that on-site employees are engaged at an appropriate level to ensure they are aware of the health and safety management arrangements on site and that the communication and engagement vehicles are advertised and understood.

Engaging the workforce
In 2008, CBES started to consider how it might better engage its workforce. "You need an element of maturity before you can embark on worker engagement and behavioural safety", says Duncan. "We had the 'hardware' in place and needed to move on a stage." As a first step, he attended a RoSPA course and saw what other companies were doing.

The main ways in which CBES communicates information on health and safety to its employees and contractors are toolbox talks, inductions, formal training, notice boards, open door policy, safety alerts, posters and briefings. Consultation is conducted through formal training, briefings, safety workshops, and during audits and inspections. With contractors, the main methods of consultation are formal training and pre- and post-contract review meetings.

CBES also consults its workforce via an annual employee survey, which has a number of questions around health and safety, primarily focused on: how employees felt health and safety was being managed; how safe and well managed the sites were; and how their wellbeing was being looked after. The overall satisfaction in the 2010 survey on health and safety was 96.3%, up from 93.3% in 2009.

The formal approaches, says Duncan, “work well to varying degrees”. Although toolbox talks can provide a means of engaging the workforce, “the effectiveness tends to be dependent on the delivery of the person giving the talk: if the person is emotive and confident, then this mechanism works well”; the converse is also true. Inductions, he adds, “tend to be what they are; they engage the workforce at point of entry on the project and provide a means of giving an introduction to the site regarding rules, site facilities, responsible persons, possible coordination issues and general hazards that affect the workforce during that point in the programme.”

Duncan also highlights the importance of informal engagement and personal relationships with the workforce. On site visits, for example, he will make a point of asking about a colleague’s family or talk to them generally. This, he says, means they are far more likely to engage with him in the future.

Duncan is confident that he is getting the views of the workforce: “Although you will not get the full pitch all the time, we have a culture where people will approach either myself or a director. The behavioural safety and supervisor training has really helped here.” Behavioural safety, he adds, “reinforces ownership: it ensures staff don’t walk by and that we reward good behaviour”. As part of wider worker engagement initiatives, behavioural safety training has resulted in an increase in the number of near misses reported, which during 2009 exceeded for the first time the number of reported incidents (54% of 93 reported incidents). This has increased from 28% in 2008 and, says Duncan, “really shows the huge buy in from our people”.

**Training is key**

Duncan's experience is that “the best means of engaging the workforce is during formal training sessions”. The company’s health, safety and environment team is accredited to deliver five suites of training: ConstructionSkills–Site Safety Plus (Health and Safety Awareness, Site Management Safety Training Scheme (SMSTS), Achieving Behavioural Change, and Site Supervisor’s Safety Training Scheme); IOSH (Supervising Safely, Working Safely in Construction); UKPIA (Petrol Forecourt Passport); Safety Passport Alliance (Core and Petrol Forecourt Passport); and UK Asbestos Training Association courses (category 2 – Unlicensed asbestos removal, and category 3 – Asbestos Awareness).
Members of the management teams hold as a minimum the Construction Skills SMSTS and appropriate Construction Skills Certification Scheme (CSCS) skills cards. Supervisors and operatives will have undergone ConstructionSkills, IOSH and UKATA health and safety training and will hold skills cards pertinent to their role.

The courses are tailored to reflect the work needs of CBES, and Duncan believes that “the workforce tends to open up a great deal more than they do during other engagements. I think this tends to be due to the fact that we take them outwith the construction site and into a classroom environment. Therefore the perception is that although it is a bit more formal, the time is dedicated solely to them over a half-day, one-day or two-day course. This gives them time to digest the information being delivered and provides a forum in which they can express their opinion on safety matters or seek clarity on points relevant to their site works.”

Duncan also emphasises the importance of explaining the reasons behind a decision, stating that too many safety officers say merely “Don’t do this, do that”. He cites a recent example that arose during a training session on work at height, and in particular on the hierarchy of controls and the selection of work equipment, when a trainee said to him: “No one has taken the time to sit down and explain it. Now it makes a lot of sense.”

Engagement through training

Duncan emphasises that workers are “willing to discuss safety aspects more readily than they would in the site environment”. For example, in a supervisors’ and operatives’ course, the workforce stated that the safety footwear CBES supplied was not the most comfortable when worn for long periods. “This information”, says Duncan, “has allowed us to go back to the suppliers and identify other types of footwear that we are in the process of trialing in order that we can make available a larger and more comfortable range of footwear for employees.”

Another example that the workforce raised during training concerned the need to sign off on risk assessments on every job and “the sometimes generic nature of documentation”. This has allowed CBES to improve its own systems, taking account of the feedback it received from the site teams, and it is now “rolling out ‘dynamic’ assessments with some departments that are conducting reactive maintenance activities, which will allow these assessments to be drafted in part by the personnel carrying out the task. Also, the feedback has allowed us to brief out the necessity for individuals to sign off on assessments based on legal compliance and give them an understanding of the civil liability side and the need for defensibility in this area.”

CBES also offers training to contractors; it is important, says Duncan, to “try and bring the supply chain with us”. In the past three years, it has undertaken over 1,000 days of training of contractors’ staff. The CBES website is equally emphatic: “We seek to ensure that all our supply chain actively works with us to ensure the maintenance of safe working practices. We undertake rigorous evaluation of our supply chain, requiring demonstration of competence and ability to manage health and safety for all works.”

Gloves, glasses and guardrails

Many of the benefits that Duncan highlights are at the sharp, practical end of the job. For example, the major contractors group for which CBES does a large percentage of work had stipulated that all personnel working on its sites would be
required to wear suitable hand protection, but did not specify a standard. Duncan says that, “rather than wear any type of glove on the market, we employed the services of a leading glove manufacturer to assist us in identifying gloves for the individual trade tasks that we undertake. This allowed us to trial various types of gloves supplied by the manufacturer and, over an eight-week period, get some feedback from the site teams as to which gloves suited the task, based on dexterity and the required level of protection against abrasion, cut, tear and puncture. Without appropriate feedback from the site-based personnel this process would have been far longer and less effective. Further, without the workforce involvement, there would have been less buy-in when asked to wear the hand protection on sites. [The process] additionally assisted us in complying with our risk assessment responsibilities.” This resulted in a dramatic drop in hand injuries from 44 in 2006 to 10 in 2009. CBES is now embarking on further consultation over a second generation of gloves because new technology has resulted in the availability of lighter gloves. It is also consulting on the introduction of safety glasses, which will be mandatory by July 2010, and has similarly used trials of different glasses to inform the consultation.

A third example involves the identification of work at height equipment, where the company recently rolled out the use of advanced guardrail systems on its mobile tower scaffolds. “The feedback we got initially from the site teams”, says Duncan, “was fairly positive and it allowed us to encompass the work at height hierarchy to a higher level (the use of the advanced guardrail system negates the need to utilise the traditional 3T method of access). A particular manufacturer’s system only works in this way, however, when the working platform is at a given height; we would not have known this unless we got the feedback from the site team.”

SAFE plan

The company has instigated site-based health, safety and environment initiatives to assist with worker engagement, including running sessions and competitions based on risk assessment on the back of the European Safety Week. CBES “rebadged” the week to fit its own agenda as a “SAFE” (Site Assessment For Everyone) plan. “This largely went very well and got our site-based teams developing their own risk assessments based on their specific works,” says Duncan. The risk assessments were task-specific and involved supervisors and the workforce at selected sited throughout the UK.

CBES gave rewards for some of the best regionally developed plans, including a night out for the winning team, as well as individual and best assessment prizes. This, says Duncan, “provided a bit of a carrot and impetus to the involvement. This led to a bit of competition between sites and regions and eventually a lot of buy-in from the site teams and got them involved in the risk assessment process.” The advantages of SAFE, he adds, are that it conveys the simplicity of risk assessment and also gets the workforce thinking about the assessment process.

Duncan also compared the SAFE risk assessments with the generic risk assessments that are downloaded as basic templates and implemented at site level; the SAFE assessments, he says, tended to be more detailed, concentrating on issues such as access and egress, technical matters and environmental aspects. Some of the sites still use SAFE as a complement to management’s risk assessments.

Occupational health

CBES has used an occupational health programme and initiative, which has the benefit of helping to engage the workforce. The company has an occupational health programme that it runs in an office-based environment and that includes screening
in areas such as audiometry, vibration, dermatitis and spirometry (pulmonary function testing). Occupational health screening is undertaken at CBES’s offices and on its sites using mobile screening units. CBES also invites other contractors on these sites to participate.

The units visited several sites and saw around 110 people during the initiative. “Initially, this approach was met with a bit of cynicism”, says Duncan, but after briefing about the purpose of the initiative, “the workforce opened up and participated well. Engaging the workers in this way helped raise their awareness of health issues and this will be continued throughout 2010.”

**The benefits of engagement**

Duncan believes that the main benefits of engaging workers include relationship building and “increased trust between the employers and the workforce [and] therefore improved adhesion within the business with regard to communication. A sense of inclusion in site and workplace decision-making is engendered with the workforce, which brings benefits in terms of the workforce participating and assisting CBES in achieving corporate and local objectives. People generally support what they have been involved in building and, in doing so, feel part of the team, therefore participation and discussion becomes fairly open and is encouraged.”

Engagement, adds Duncan, has improved CBES’s strategy for managing risk “as generally the best ideas about managing risk come from those at the coal face”. There is also “a better understanding of programme issues raised at site level by the site team and a more detailed understanding of what works best in a given situation.”

**Barriers to engagement**

The main barrier that CBES had to overcome in order to engage workers in health and safety, says Duncan, was “trust – the risk that engagement could be seen as another safety fad if approached half heartedly. It is important that any engagement is considered and approached with a sense of value, openness and sincerity; challenges are likely to be encountered in the sustainment of quality engagement practices that give feedback and utilise the opinions and viewpoints of those being engaged. It is of the upmost importance that personnel being consulted, or communicated with, feel valued and are considered an important part of the delivery of the company’s aims and objectives.”

In terms of ongoing potential barriers to engagement, Duncan advises: “Problems can be encountered between line manager and supervisor level as these parties are at times compromised by programme pressures and workload issues. In order to overcome these barriers, line managers need to keep reinforcing the safety message, lead by example and ensure that safety aspects can be communicated freely. Other weaknesses may result from individuals having their own agenda and possibly using safety as an excuse to prompt a particular response.” Communication, he adds, “is a huge element for supervisors”; the training that CBES provides “challenges them to look up and down the chain”.

**Help for the future**

The main assistance that Duncan believes he needs to help engage workers is “sufficient time allowed by project programmes to effect communication on a site basis and effective worker engagement”. Beyond CBES, he believes that employers need access to competent personnel and advice in order to develop a coherent strategy for engaging the
workforce.

As to the future of workforce engagement at CBES, Duncan says: “We have embarked on a journey where we have travelled from basic engagement through to the utilisation of behavioural safety to get people to support further what they build. The journey is one that is aimed at continuously improving the safety and wellbeing of our colleagues and a key element of this improvement is that of engaging with our people to realise our health and safety visions and objectives as a business.”
APPENDIX 2: HIGHLAND SPRING CASE STUDY

“This is the thing: health and safety should be fun; it should be positive rather than negative”, says Jonathan Neale, health and safety manager at Highland Spring Ltd. “This is something I have tried to champion … We are congratulating people for getting things right rather than penalising them for not doing things the correct way”. Recent years have seen enormous strides in the company’s attempts to involve its workforce in health and safety through representatives, committees, an annual conference and a “near miss” competition, supported by enhanced provision of safety information through “factory-proof PC kiosks”. And the results?

* a “direct correlation” between increases in the numbers of near misses that workers report and remedial actions taken on the one hand, and a decrease in the number of reportable and minor injuries on the other;

* the safety representatives and committees contribute significantly to the development and implementation of policies and changes in procedure on the shop floor;

* the workforce no longer see the health and safety manager responsible as “the lynch pin for getting things done on health and safety” – there is now engagement at all levels of the company;

* an increase in workers’ awareness of health and safety and its relationship to the business;

* clear business, process and safety improvements;

* there is now “peer pressure” to behave safely; and

* a perception that employee relations are much improved.

Highland Spring

Sourced from a protected catchment area in the Ochil Hills, Perthshire, Highland Spring is the largest UK-based producer of natural source water in the UK. Formed in 1979, the family-owned company employs currently over 300 staff in total. The business has benefitted from over £60m worth of investment during this time to ensure the main plant in Blackford remains one of Europe’s most modern bottling facilities. In addition to the Blackford site, the company also owns the Speyside Glenlivet Water Company in Moray, which has 13 staff, and the nearby Gleneagles Natural Mineral Water Company, which has 24 staff. Highland Spring’s annual turnover in 2009 was estimated to be £54 million. In 2009, it accounted for 8.6% of the 2.1 billion litres UK bottled water market. In addition to being the producer of the only bottled water to come from certified organic land in Scotland and the first ever UK producer to have its land certified as organic by the Soil Association, Highland Spring has also been recognised for each of the past four years by the Good Shopping Guide as the leading ethical brand of bottled water.

In November 2009, Highland Spring agreed to buy Greencore Water, which comprises Campsie Spring in Lennoxtown and Blaen Twyni in Wales. The sale is expected to be completed by 30 April 2010, at which point Highland Spring will become the largest supplier of bottle water in the UK, with five bottling plants and 12 production lines providing a production capacity of 700m litres a year. Greencore Water’s 124 employees will bring Highland Spring’s total workforce to in excess of 400.
There are no recognised trade unions within Highland Spring, although some of the workforce are union members. At one point, the company invited Unite in to make some presentations to the workforce after they were recruiting at the gates, but the ensuing ballot failed to reach 50% support for recognition. The company operates an employee forum comprising staff from across all departments, which is tasked with representing the interests of the employees. The company states this has been “hugely successful” and will be extended to the Greencore sites once the acquisition is finalised.

The company has not been involved in any enforcement action in the three years to February 2010.

The Blackford site

Blackford, which is the main Highland Spring site and the subject of this case study, has 289 employees, having started with 50 in 1979. The site draws its water from 2,000 acres of certified organic land in Perthshire through stainless steel boreholes into the factory where it is bottled. Processes include inflation of the bottles from small lumps of plastic, putting the water into glass and PET bottles, carbonation (where appropriate), capping the bottles, labelling, microbiological and taste testing, boxing-up and distribution. The plant is a 24/7 operation and has four state-of-the-art bottling lines, producing one million bottles a day.

The site uses also produces own-label products for some of the UK’s best-known grocery retailers and bespoke promotional waters for, among others, leading football teams.

The health and safety structure

Jonathan Neale is responsible for health and safety. Jonathan joined Highland Spring as a continuous improvement manager in 2003, having previously worked for an automotive company as a production manager. Four years ago, he additionally became Highland Spring’s health and safety adviser before, two years on, becoming its full-time health and safety manager. Jonathan has completed the NEBOSH certificate and subsequently gained a part-time degree from Glasgow Caledonian University in occupational health and safety management.

Jonathan reports to the manager of the technical and QA department, who reports to the operations director (who is responsible for goods in, manufacturing and the warehouse). Jonathan provides a summary report, with figures, every month to the technical manager. Until two years ago, he was part of the manufacturing department, but the company thought his current department was more appropriate.

When Jonathan started at Highland Spring, he was very much on the shopfloor talking to people; this is still a huge part of the job and he we will make a point of walking through at least a part of the factory every day. He has, in any case, a personal relationship with the workers because he has trained them all. But nor does he want to be seen as the “repository for all things health and safety – neither a policeman nor a focal point”. Jonathan says that his objective is for the company’s safety representatives to involve the workforce themselves, although he “would not leave them high and dry” in their attempts to do so.

The board

Although the previous chief executive officer, Joe Beeston, steered the company from a loss-making operation in 1992 to one that made sustained profits by the time of his death in 2008, he had “no direct involvement in health and safety”, says
Jonathan. And while current chief executive (CE) Les Montgomery, who has been in the post for two years, “is not necessarily hands-on with health and safety”, he insists on a one-page report every month and makes it clear that it is an integral part of the business. The CE gives quarterly briefings to the whole factory (four presentations for four shifts) covering the financial health of the company, the objectives for the year, and health and safety objectives with a message along the lines of “I want to keep my staff safe and healthy”, after when the operations director sets out the more detailed plan plans for the year. In January 2009, in the midst of the economic uncertainty, he announced that he would keep on every member of staff for the foreseeable future; this, says Jonathan, “sent a very strong message to the workforce”.

There is no named board member responsible for health and safety, but board meetings consider health and safety KPIs and Jonathan believes that the recognition of the issue by all the directors has increased. The first training that he set up after joining the company was to bring in Scottish Engineering to do top-level management training, covering the law, responsibilities and corporate homicide. “The great thing about Highland Spring is that everyone is on the site here – the directors are all on site and very in touch with what goes on in the factory”, says Jonathan.

The managers have targets to raise health and safety issues, which are also part of every briefing from managers; the targets include “reduce accidents by 33%”, “target number of near-misses reported” or “achieve average audit result of 80% or more”. In addition, the operations director, Wyllie Woodburn, will be in the factory at least two days a week and “he is very much the type of person who would rather you told him [about a health and safety issue] even if you thought it was controversial. We might not agree how to deal with it and, like a family, we might bicker, but we always get to a solution.”

**Starting over**

The situation facing Jonathan when he joined Highland Spring in 2003 was characterised by:

- high levels of minor accidents – slips, trips and falls, bumped heads etc;
- fragmented and “tick-box” risk assessments that were not being used to improve health and safety;
- little hazard reporting because the staff’s knowledge about hazards was poor;
- no regular workplace inspections; and
- a fragmented representative system, in that not all departments had a safety representative and there were no regular committee meetings.

Jonathan’s automotive background meant that he was already familiar with the types of health and safety systems and procedures Highland Spring could benefit from, and senior management as a result asked him to implement them. When he became health and safety manager, Jonathan admits to “throwing his weight around and becoming a real pain for managers”, (although not necessarily for the operators). In those early days, he had to resort to a “rules and regulations” approach.

Now, however, “the style is very different; because we have moved on as an organisation, I don’t need to do the rules and regulations; it is just about encouraging best practice.”

Regulatory requirements were also his starting points for involving the workforce. The Management of Health and Safety at Work Regulations require a work system that involves the workforce, “so I thought ‘how do I improve it’, and was given
carte blanche to see how I was going to do it”. In terms of consultation, he soon moved to looking at it from a management, rather than regulatory point of view. “There was a good managerial culture in the factory any way, so all I had to do was get a management system set up and everything else would fall into place.”

5S

To start with, he tried to improve the involvement of the workforce in problem solving, ie on a reactive basis. Every morning, he would sit down with the operators, managers and engineers and try and work out the root causes of any problem that had arisen – not just health and safety, but quality, line problems too – and try and stop them occurring again.

In 2006, he recommended Highland Spring implement the “5S” workplace organisation technique that he had used in previous workplaces. 5S is a Japanese technique championed by the likes of Toyota in the 1950s and 1960s when Japan was rebuilding its car industry. 5S is concerned with efficiency – and so will cover health and safety as well as quality and production. The technique involves setting, and adhering to, a standard. The five “Ss” are: sorting (keeping only essential tools); straightening or setting in order (arranging the tools to promote work flow); sweeping (cleaning); standardising (work practices); and sustaining the discipline (maintaining and reviewing standards).

The company launched 5S in 2006, and accidents subsequently fell by 20% in most areas, with the company’s managers happy too with greater efficiency and quality. Examples of the changes secured, which followed consultation with the safety committee and the individual workers involved, include:

• The engineer’s toolbox: all the engineers had their own padlocked personal toolbox. Jonathan showed the engineers a “shadow board”, upon which all the tools were arranged. He demonstrated how this reduced the time taken to find a spanner from 10 to five seconds and that this would save a shift a month just looking for spanners. Further, a clean, tidy and organised workplace, with reduced amounts of kit lying around, also reduces the hazards.

• Changing the bottles: the different types and sizes of bottles mean that parts of the machinery have to be changed for different runs. The differences between some of the parts are subtle, so Jonathan used colour coding for each group of parts and hung them on a wall, allowing fast and errorless changeover. Steps allowed easy access and the heavier parts were hung at waist height to reduced the risk of manual handling injuries. The site was again far tidier as a result, and the process was speeded up with the potential for error vastly reduced.

• Visual control: the introduction of blue walkways improved hygiene control because workers would then not walk on gray areas, which stayed cleaner as a result. The benefit for safety was that the walkway was positioned away from potential hazards.

Workforce involvement was crucial in the above examples and other improvements. Although Jonathan would usually came up with the best practice concept, and made it clear that he would implement it, he was equally clear that the workers could have a significant say in how the changes looked and operated; as a result, the employees discussed the changes and organised and implemented them.

The safety committee
In the early days of the safety committee in 2004, says Jonathan, “individuals were often too shy to express their views, but as the committee and its various members have evolved, they have become much more of an improvement tool”. This contrasts starkly with his previous company where the atmosphere had been initially antagonistic and points-scoring, although this too settled down.

Until 2009, Highland Spring had a single quarterly health and safety committee comprising Jonathan and the operations director, facilities manager, engineering manager, and employee representatives (see below). With up to 20 people around the table, Jonathan believed the committee had become too large to implement the improvements that were necessary.

In 2009, he pared the committee down into separate monthly safety committees for each Highland Spring department: manufacturing at Blackford; the warehouses at Blackford (goods-in and distribution); Gleneagles; and Glenlivet. There are 10 employee safety representatives in all: four from manufacturing (one for each team) and one each from distribution and goods-in at Blackford; three from Gleneagles; and one from Glenlivet. A representative from water source team attends the annual conference. The office staff do not currently have their own committee, although they have two representatives at the annual conference; the company and the representatives are planning to review office representation later in 2010.

In addition to the representatives, each committee would usually have a departmental manager, an engineering manager and a line manager, although this will vary slightly according to local circumstances. Jonathan attends each meeting, coordinating and communicating between them to ensure consistency.

The company sets an annual improvement plan for each team that is suggested by the safety committee. So, for 2010, the manufacturing department, which was the first departmental safety committee to discuss its plan, decided it wanted to work towards the Scottish Health at Work (now Healthy Working Lives) bronze award but, because this is an issue of site-wide relevance, Jonathan is approaching the other committees to see whether they will come on board. He is aware that the warehouse committee wants to target improved driving standards, so he is looking at strengthening refresher training. The warehouse also wants to address hygiene control and cleaning up regimes – one of the big safety issues is that when it pours with rain the forklift trucks drag water into the loading bays, rendering it a slip hazard, so Jonathan is looking at treating the concrete or laying down grip mats. Each team has now also set targets for audit scores and accident rate reductions.

**Annual safety conference**

In February 2010, the company held its first annual site safety conference, which was attended by 30 individuals from all Highland Spring’s sites, including the chief executive, operations director, department managers and all but one of the representatives (who were given time off to attend). All the committees reported their plans (see above) and past activities to the conference, which was the first time they had all gathered together. Highland Spring saw the conference as much an exhibition and celebration of what the representatives and committees had achieved over the previous 12 months as it did a review of strategy.

The conference had guest speakers, including motivational speaker and trainer Ken Woodward, who lost his sight while working for Coca Cola in a bottle-cleaning incident, and whose training programmes Jonathan has used. Jonathan also
brought in a lawyer to talk about how the courts and law view health and safety. Jonathan reports that the conference was a “great success” and that feedback has been “tremendous”, with the representatives “re-energised”.

The safety representatives

As a core part of his approach when he took over responsibility for health and safety, Jonathan tried to reinvigorate employee representation, with “mixed results at first – some teams were enthusiastic, some teams were not”. It was difficult, he says to get volunteers and there were “growing pains”.

Each department chooses its own representatives, and there are, as we noted above, currently 10 across the three sites. There is a “core” of representatives, although the length of their terms can vary: the goods-in team, for example, will do a year each, but others might do longer. A representative will typically spend at least eight hours a month on representative duties.

Empowerment, says Jonathan, comes with experience of the job and representation. Generally, the representatives are unsure at first but, after six to eight months in post, they are confident.

Part of this confidence is instilled by training. Every safety representative and operations member of staff has completed the Royal Environmental Health Institute of Scotland (REHIS) one-day “elementary” course in health and safety. (REHIS also audits Highland Spring as a training centre and Jonathan as a trainer.) Jonathan tailored the course to Highland Spring’s needs and is currently developing REHIS’s four-day intermediate course so that he can take all the safety representatives through it in 2010. (He emphasises that any tailoring must not interfere with the syllabus.) Highland Spring is a certified training centre and Jonathan is a certified trainer, so he does the training in-house.

He also runs an annual half to one-day course specifically for the representatives that is separate from the REHIS course, and has developed and delivered be-spoke training for the representatives on risk assessment, auditing and accident investigation.

The representatives are also encouraged, and given paid time off, to visit other companies. This occurs two or three times a year and cover all types of manufacturing companies, not just drinks. Jonathan sets clear objectives for the visits, for example checking a manufacturer’s approach to working at height. The representatives report back to each committee.

Representatives inspecting

Jonathan completely revamped Highland Spring’s audit and inspections procedures. The safety representatives carry out monthly “audits” in which they inspect their own area once a year and different areas 11 times a year. The advantage of this is that there is a “fresh pair of eyes” looking at each area every month.

The safety representatives have been trained in what to look for, given a form and picture of what is expected. The representative scores the inspection pass (1) or fail (0) and then uses a risk assessment rating system of 1–4 to determine the timescale for fixing the problem. This has allowed for consistency between representatives and made it easy to carry out the audits. It “took a bit of doing”, says Jonathan, because we had to get them to a level where they could assess the hazard areas and this is where the form comes in.”
The audits take an hour to walk the area, with 30 minutes for paperwork. The representative then talks to the manager about the actions that are needed to resolve the problems, and will rectify the problem if they are able to do so. The results are entered into the company’s intranet system; Jonathan sees the results and has a system that logs and traces actions. He is now trying to extend involvement in inspection beyond the representatives to other team members on one site (at Gleneagles), by encouraging them to accompany the representative on the site walkarounds. If that goes well, Jonathan will then check they are competent by means of a hazard identification test prior to signing them off to carry out inspections of their own.

The safety representatives feed back to their teams informally and formally. The manufacturing teams meet informally once every rotation (ie every four days) on the last day; the other departments tend to meet monthly. At these meetings, the representatives report back, raise any issues, comment on the status of any particular near misses, ie whether it is deemed worthy or action and, if so, what has happened. The big problem three years ago when the system started, says Jonathan, was that people would put in a near miss ticket and then hear nothing about it. Each team and representative can handle the meetings differently; there is one representative, for example, who does not like standing up in a meeting, so instead sees each member individually.

**Factory-proof PCs and involving the workforce**

Highland Spring, says Jonathan, used to have the same “telephone books” of procedures, paperwork, audibility, traceability and inspection as everyone else. In 2004, the company introduced “factory-proof PC kiosks” – a self-standing stainless steel case with a computer display screen in the middle and a robust metallic keyboard that could withstand factory and warehouse floor locations. There are around 20 kiosks on the site, in addition to the office PCs.

The company IT team that tailored the programmes to Highland Spring, and the machine operators were involved in designing the look of the forms and pages on the PC. Aside from eliminating paperwork, the PCs allow “immediate traceability”; the operators log on when they start their shift, allowing the company to know exactly what they have done and when; it also reminds the operators what they need to do and when. Operators use the kiosk for a multitude of functions – to look up the intranet, book their own holidays, communicate with shift managers, email the facilities manager with problems such as a roof leak, and email Jonathan about near misses etc. The company also uses it for HR communication and publishing the newsletter.

When operators log on, they see a “flash” that they read and acknowledge. The “front page” covers: health and safety; quality; guard checks; line cameras; standard operating procedures; and specifications.

The operators appear to appreciate the kiosk because it tells them that they need, for example, to do a safety or quality check during the next hour, how to do it and records the findings. The machinery check procedure is simple, with a dashboard on the operators’ and managers’ screens showing a “red,” “amber” and “green” traffic light system. This means that managers no longer need to walk around the machines checking that the checks have been done.

Checking the guards on the larger machines is potentially complicated: they have up to 20 different interlock doors, each of which must be checked by the machine operator at least once a rotation. Before the kiosks, the company had a rota that was difficult to manage. Now, however, the machine diagram has flashing indicators for the part to be checked; the
operator does not have to think about which door; it comes up automatically. Some even have video clips, and Jonathan can also bolt on any safety information that he needs to, for example use of PPE or a “hazardous” warning. Although a regular operator will not read this information every day, it is useful as a training tool for new operators or if the operator has been on holiday or sick leave or has otherwise not run the machine for a while. (All operators will also have had bespoke training.)

The operator checks every four days; the line manager will check the operator has done this; and Jonathan’s department will check monthly that the line managers are checking. There is in any case a climate of checking and auditing within Highland Spring because of the environmental imperatives. “Product safety is our top priority and one we would never take for granted”, says Jonathan. “We have seen what happens to brands that fail to take the necessary safety precautions: you have only to think of Perrier [a product recall in 1990 due to benzene] and Dasani [tap water purification controversy and bromide in the water in 2004 that led to Coca Cola removing the product from the UK and dropping plans to launch it in several large European countries]. So there is very much a culture to protect our brand. People are loyal to it. There is a community culture here; quite a lot of the people who work here live in the village or nearby and everyone works on site here. Les [the CE] says his ‘door is open’ and the operators will regularly go up and give him a piece of their mind.”

Near misses

A few years ago, the workers were reporting barely any near misses. Using a quality management package, Jonathan launched an initiative in October 2005 to encourage workers to report near misses – a little like DuPont’s Safety Training Observation Programme (STOP). The first full year elicited 206 near misses in 2006, he says, rising to a “cracking” 286 reports in 2007. In 2008, however, the total fell to 177 and remained constant through the first nine months of 2009 until a “competition” (see below) boosted the total to 220.

“On any site there are always hundreds of potential hazards at all levels, and it is just a matter of looking for them,” says Neale. “So, when you go into a plant where there have been no near misses, the first that come out are the ‘real humdingers’ that you fix because they are blindingly obvious. Once these are out of the way, there is a myriad of minor issues that comes out of the woodwork that you would not have bothered about initially.”

The experience of Highland Spring has been that “the level of reporting is determined by the level of knowledge”. During the second part of 2008 and into 2009, the company carried out a large amount of health and safety awareness training, which meant that the level of knowledge was heightened when the competition came around (see below). “The level of near misses suggests it is a dangerous factory”, says Jonathan. “That is not the case. It is just the level of things that people are seeing and fixing. In terms of the accident triangle ratio: if we have 45 minor accidents, we should be catching many hundreds of near misses.” High-risk near misses must be fixed within one day, whereas medium to low-risk near misses have one month for completion.

Jonathan believes that a significant barrier to effective workforce involvement and the reporting of near misses is “blame culture”: in the warehouse, for example, hitting the racks should not happen if the forklift truck is driven carefully. If the workers fear disciplinary action if they report a second or a third knock, they will just drive on, but if they hear of good “no blame” examples from other departments, they will be more inclined to report the incident. Jonathan also comments that
newer and younger staff can be easier to induct into the culture because, unlike some older members of staff, they do not bring the same experiences and cultures with them;

**Safety survey**

In 2009, the company started to think about behavioural safety: although the accident rate had improved significantly over four years, it had plateaued. That same year, Jonathan completed a part-time degree at Glasgow Caledonian University in occupational health and safety management; his final project looked at behavioural safety, which allowed him to research and distil to the shopfloor his findings. It is a common misconception, he says, that “behavioural safety means that people will concentrate more and not do stupid things”.

The company considered but rejected bespoke systems such as those offered by DuPont and BP. Instead, Jonathan adapted a railway behavioural safety questionnaire to ask 30 questions, for example, “would you stop your machine if there was a safety issue”, “do you report all near misses when you see a hazard” and “do you think your manager is safety conscious”. The kiosk system enabled a 50% response at Blackford, with 100% at the two small factories. Although the survey was anonymous, it did require a job title.

Jonathan grouped the results of the survey into different behavioural safety factors: involvement; management commitment; and the availability of adequate resources. The results differed between departments (because of the different types of work, the type of worker and their knowledge. The key findings were that workers would stop their machines if there were a safety issue and the weakest areas concerned involvement in safety issues, for example the reporting of near misses. Jonathan personally provided feedback to departments and managers “because you have to explain the results and what is trying to be achieved”. He hopes to repeat the survey annually and at the new Greencore sites.

**Competition**

On the back of the survey findings, Highland Spring’s safety committee considered what the company might do to encourage workers participation. One of the safety representatives suggested a competition; although this was not immediately popular with all the committee members, they nonetheless decided to run a competition between October and December 2009 among four manufacturing teams to see which could identify the greatest number of “near misses” and complete the most safety improvements. The competition was restricted to manufacturing because it operates a four-team system, with around 30 people in each team working a 12-day shift pattern; four 12-hour day shifts (7am-7pm), four days off, and four 12-hour night shifts (7pm–7am).

Jonathan used teams, rather than individuals, because the manufacturing health and safety committee felt that team membership and rivalry would increase participation: every week, he would put a “flash” onto the kiosk giving the scores in a “light-hearted” way. Although the company did not announce what the prize would be, it was a contribution to the christmas party. Jonathan stresses, however, that the workers appreciated the competition as much as the prize and all the teams benefited.

The safety representatives were very enthusiastic and drove it within their teams; “peer pressure and motivation really worked”, says Jonathan. The response was “superb”, with nearly 100 safety improvements, of which 10% were significant
“core” hazards that the company had not previously uncovered – for example replacing the use of step ladders to reach a difficult access point, with a vertical lift operated by a trained person. Most of the near misses were minor, however, particularly in terms of the solution, for example moving a cable that was lying across the floor so that it was not a trip hazard, or clearing up water on a floor.

Although there were some “very minor” (but not “silly”), hazards raised, Jonathan ruled out few, opting instead to tell the workers that they should deal with them; for example, when one operator raised the issue of water on the floor – in a wet area – Jonathan persuaded him first to mop it up and then to call in an engineer to improve the drainage, after when he scored it a “near miss”.

The competition, says Jonathan, helped put in place “hazard identification behaviour”, and the ease of most of the solutions helped cement in the operators’ minds the confidence that they could fix things themselves.

Highland Spring is considering building on the success of the competition to do something for all staff, not just those in manufacturing. A competition along similar lines is difficult because other departments do not run shift systems. The company is now looking at running a Scottish Health at Work initiative across the site; suggestions include a weight loss competition, support for stopping smoking, and healthy eating. These, says Jonathan Neale, should allow room for a competitive edge: “This is the thing: health and safety should be fun; it should be positive rather than negative. This is something I have tried to champion, particularly in the past 12 months. We are congratulating people for getting things right rather than penalising them for not doing things the correct way. We have to have discipline, of course, but the whole inference of health and safety could be turned on his head and that is the crucial thing with behavioural safety; if we go down the negative route of ‘he is not wearing his PPE’, for instance, which is very much the DuPont way of doing things, it can become very bitty and almost cynical. None of the safety improvements in the competition concerned people not doing things the correct way, for example. Although that is not, of course, to say we are there with PPE.”

The company also runs other competitions, which are not necessarily limited to health and safety, with prizes – which can be collective – ranging from boxes of chocolates to days out at events that Highland Spring sponsors (such as snooker and tennis).

**Raising issues**

Highland Spring has intentionally maintained a variety of avenues for reporting health and safety issues:

- using email via the kiosk to advise Jonathan Neale and the shift manager of near misses – this is the most popular method as the employees are using their machines every 30 minutes or so in any case;
- ticket or card system;
- approaching safety representatives directly; or
- approaching Jonathan Neale directly.

Jonathan receives few anonymous reports but, when he does, he encourages the person to go public with the issue. He will, however, act on confidential information, although such instances have been rare. And where workers have been genuinely
concerned about being identified, they can use their safety representatives – a route, he says, that has worked well. In addition, whistleblowing lines “are open” to the chief executive. Overall, however, he believes the culture is such that there is no fear about reporting. Regardless of how an issue is raised, once the information is in the central system, it is always sent out to the managers, safety reps and Jonathan himself.

**Subjects for consultation**

Highland Spring advises that it consults workers on: periodic revision of the health and safety policy statement; development of health and safety management systems; setting strategic priorities and improvement targets; generic risk assessments; task or specific risk assessments; selection of control measures and/or safety equipment; specific policies, standards and procedures; incident investigation procedures; complaints investigations procedures; monitoring procedures; health and safety implications of future plans, including the introduction of new procedures, work processes, work equipment or products; occupational health and well-being; and first-aid procedures.

The most important consultation method is through the safety committee and representatives, with the kiosk now established as the main way for consulting with employees directly. Both, says Jonathan, are two-way processes.

Although Highland Spring does consult the safety committees on broader and more strategic issues, Jonathan has found it “difficult” because the representatives are not often in a position to “have much of a view”, and there is even less point consulting with the workforce on such issues. A better way of operating, he says, is to take an idea as a “pretty formed process” to the committee, which then considers whether it will work and what the problems are.

For example, when he wanted to split the single safety committee into four, Jonathan suggested the committee should “tweak” his ideas after they had been running for a couple of months. Likewise, with the introduction of the good management practice (GMP) audit sheet: the committee members were at first unsure, so Jonathan came back with a draft and, after a month of trials, the committee came back with comments such as “that’s in the wrong order” and “the risk rating needs to be changed”. He then drafted a full version that the representatives tried for a further month before signing it off at the next committee meeting.

Jonathan emphasises that the representatives will always have a chance to comment; he will not sign off a policy or procedure until it has been through at least one of the committees (or all if it is site-wide).

**Providing information**

The company provides information to its workforce in many different ways, including tool box talks and briefings; point-of-work risk assessments; notice boards; handbooks; bulletins and news sheets; permit-to-work systems; email; intranet and ebulletins (“Newsplash”, which is not specific to health and safety); and face-to-face contact.

**Involvement adds value**

Jonathan believes that the largest overall benefit of safety representatives and committee is in the development and implementation of policies on the shop floor and the ensuing engagement of the workers. The committee, he says, is able to review whether the “nitty gritty” is working to meet Highland Spring’s objectives. He is personally no longer “the lynch pin for getting things done on health and safety”; there is now engagement at all levels of the company.
More specifically:

• worker involvement has significantly increased the number of issues raised (the total of 300 in 2009 includes issues raised from accidents, risk assessments and inspections, in addition to the 220 “near misses”);

• there is a high rate of completion of actions once an issue has been raised;

• there is an increase in workers’ awareness of health and safety and its relationship to the business;

• a new safety committee structure representing all parts of the site;

• Highland Spring’s injury rate is well below the average for a manufacturing site when benchmarked against Scottish Engineering and HSE sector figures. While the accident rate has come down over the years, Jonathan points out that “it is still not nought”. In 2009, the company had 47 accidents (everything from paper cuts upwards); three of these were reportable over-three-day injuries, compared with two in 2008. In 2010, there has been one reportable injury. The strategy, explains Jonathan, “is to hit the minor accidents, get the near misses as high as possible, and you will see the accidents drop. I can see and prove a direct correlation between the three factors, ie the more we report and fix, the less accidents we get”;

• the safety committee had an important input into machinery guarding, with the company investing £1/4 million;

• there is now “peer pressure” on health and safety – high visibility vests, for example, are now part of the workforce’s culture and people without the vests are stopped.

• a “gut feel” that employee relations are better;

• there will be benefits from each departmental committee choosing to focus on the issues they believe are most pertinent to them; and

• any benefits from engagement in some of the more strategic issues are “much more long-term”.

The future

Jonathan Neale believes that Highland Spring has implemented most of the “big” health and safety improvements and has the necessary management processes in place at Blackford: from now on, the changes will be more gradual and building on the systems and involvement that are in place. The situations at Gleneagles and Glenlivet will need greater attention: at some point, he will extend the Blackford “system” in principle, but how it is devolved remains to be seen; one thing is for certain, however, he will not “dump” health and safety policies on the two sites and tell them to “get on with it”. There could also be, potentially, a far larger task once the Greencore purchase is complete.

Highland Spring is also looking at the message it sends out on its website. In 2009, the company rebranded to emphasise its organic credentials and the website advises that “what matters most” to the company is the environment, organics, land, community and keeping active. “Health and safety”, says Jonathan, “does not necessarily stand out as subject in itself. Our business is bottled water and it has to be pure; if our health and safety is not right, you won’t get the rest of it.” Nevertheless, he points out that many companies “will not grasp the subtlety of that message, and there has been some work into looking at the statement. The larger the company grows, he says, the more important it becomes to be explicit
publicly about its health and safety approach.

He has briefly considered seeking accreditation to OHSAS 18001, but he decided that there was not a sufficient business reason for the company to invest the time and resources to “get a badge”. He has, however, made sure that his approach is broadly in line with OHSAS 18001 and does not rule it out at some point in the future as the company grows.

In terms of the assistance that might improve workforce engagement, Jonathan highlights:

• a greater number of, and more detailed, case studies, including “warts and all” (the HSE studies are too much like “corporate brochures”, although he adds that he found some of the HSE information on involvement useful);

• tools and techniques that other companies have used to improve behaviour;

• support from external bodies to promote involvement in terms of benchmarking.
APPENDIX 3: LIVINGSTON DESIGNER OUTLET CASE STUDY

Livingston Designer Outlet is notable for the way in which it engages and trains all the staff of its contractors, and for how it involves its tenants. This involvement, together with the engagement of McArthurGlen’s own staff, has resulted – either directly or indirectly – in:

- contractor staff taking responsibility for, and acting on, health and safety issues;
- specific improvements in areas such as car park lighting, manual handling in the service yard and a new lift for people with disabilities;
- improved staff morale;
- the tenants recognising and addressing their own health and safety responsibilities; and
- an improving injury rate.

The outlet

Livingston Designer Outlet is a shopping centre located in Livingston Town Centre 20 miles west of Edinburgh. The outlet comprises 83 “tenant” shops offering discounted goods from brands such as Gap, Ted Baker and Nike. Other tenants include a multiplex cinema, health club, two pubs and restaurants. The centre attracts 6 million visitors a year.

The outlet is owned by Land Securities (50%) and Aviva (50%) (the “investors”), and managed by the McArthurGlen group, which has six other outlets in the UK and 12 in mainland Europe, which is its main growth area.

Around 1,110 people work at the Livingston Designer Outlet; 1,000 tenant staff; 55 staff from three contractors (40 cleaners, 12 customer liaison staff (security) and three maintenance/engineering staff) and 11 McArthurGlen employees. The outlet covers 28,000m$^2$ and has 2,200 car parking spaces.

The retail core of the centre is open seven days a week: from 9am to 6pm Monday to Saturday (until 8pm on Thursday) and 11am to 6pm on Sundays. The presence of the cinemas and bars, however, means that the centre is open daily from 8.30am to 2am. Potential risks include: fire; slips, trips and falls involving shoppers and contractor staff; workplace transport and manual handling in the service yards; aggression and violence towards shopworkers; and alcohol-fuelled behaviour in and outside the pubs. The company has not been the subject of any enforcement action for a health ad safety issue in the past three years.

Health and safety at Livingston

The health and safety policies and procedures that govern Livingston Designer Outlet emanate, in part, from McArthurGlen’s head office, although there are many local policies and initiatives that have been driven by the management team in Livingston. When a policy has been written by the group it is the responsibility of the local McArthurGlen facilities manager to put the policies into practice and ensure communication of these policies and procedures to everyone.
At Livingston Designer Outlet, the facilities manager is Jim Bradley. Jim’s background is a mixture of retail and property management over the past 30 years and the role he currently fulfils complements his past experiences. Jim is a member of the British Institute of Facilities Managers, a member of the Institution of Fire Engineers at technician level and holds an NVQ 3 in occupational health and safety; he is currently studying for level 4. He works with Karen Gray, who is McArthurGlen’s centre administrator; she is responsible for managing the office, and consults Jim on the health and safety issues relating to the office staff. Karen worked for Mitsubishi Electric for 14 years in the manufacturing industry within the HR department. Together, Jim and Karen exercise considerable influence over the approach of the tenants and, particularly, the contractors to health and safety. Karen has worked at the outlet since it opened in 2000; Jim joined two years later.

Karen started to implement a strategic approach to health and safety at the centre eight years ago after a team member slipped down some stairs that were wet. The incident, says Karen, “made us open our eyes and take responsibility and accountability”. McArthurGlen’s subsequent investigation found that one worker had moved the “wet floor” sign and others had seen the water. Karen could not understand why people had not automatically dealt with the water and she concluded that she did not have in place what she needed, in terms of a trained and informed staff.

Then, five years ago, the centre underwent its first British Safety Council “Five Star” audit (and has secured the full five stars over the past three years). In the first audit, one of the main recommendations was that the centre should introduce a formally constituted health and safety committee. Jim coached Karen, who accepted the challenge to draft the constitution. Jim then approached head office directors with the constitution and sought approval for Livingston. Head office immediately asked for the constitution to be rolled out to the other outlets, with the result that all the other UK outlets now have quarterly safety committees constituted as per Karen’s blueprint.

Karen and Jim have sought information on involving workers in health and safety matters from the HSE (online and paper guidance), the local authority, RoSPA, the BSC and other safety organisations. They add that, with “the expansion of the amount of information and documentation that is available on the web, we have found that the large majority of information can be sourced by us in-house.”

**The McArthurGlen board**

The McArthurGlen board meets quarterly and includes a representative from each of the “investors”. The operations director, David Norris, has health and safety as a responsibility, and board meetings routinely discuss health and safety. In September 2008, Kelly Holifield, who is the corporate manager responsible for health and safety and sustainability issues, ran health and safety training for McArthurGlen’s chief executive officer (CEO), Julia Calabrese, and six other directors. The CEO signs off the health and safety documentation.

The company has a group health and safety committee comprising the operations director, property manager and representatives from the facilities managers. Jim is not on the group but he can be co-opted because it travels around the country from outlet to outlet. Jim also has contact with the CEO because he is responsible for the group’s disaster recovery plan, while Karen has worked with the operations director helping him open other outlets. She adds that the company’s HR director, Claire Tiney, makes a point of telling staff that they should let her have suggestions, and Karen says that her experience is that they are considered and that feedback is given on if, and how, they are going to be implemented.
Jim says that McArthurGlen is good at sharing best practice through its business. The outlets are able to adapt the corporate policies to suit local needs and also to suggest ideas that have the potential to be incorporated at group level. Jim and Karen have both implemented solutions locally and made suggestions that have been rolled out to all the outlets, while also securing agreement to pursue certain things their own way. Livingston is also rare in that it tends to “lead” on many policies that are then extended throughout the group.

**Involving the contractors**

The McArthurGlen management at Livingston have a long-term relationship with the contractors, all of which have been on site for at least three years:

- Vanguard Security Services, which provides security staff;
- ISS UK, which is one of the largest cleaning companies in the world; and
- GS Hall, an engineering firm (which tenders every three years and has just agreed a two-year extension to carry out maintenance).

Even where the contractor changes, there is continuity because the staff move to the new contractor under the Transfer of Undertakings (Protection of Employment) Regulations. In many aspects, the McArthurGlen managers at the outlet treat the contractor staff as if they were their own, emphasising that the building provides all of their jobs and therefore necessitates a team approach, Jim adds that McArthurGlen’s unique leasing strategy is different from the normal landlord-tenant relationship on the high street; McArthurGlen’ leases are shorter, more flexible and contain a turnover clause ([a minimum rent plus a percentage of turnover]. There is, therefore, “an ethos of everyone working for the common good”.

Jim and Karen look at the health and safety records, policy and arrangements of all potential contractors that might come on site – the brands’ contractors as well their own – and stipulate they should be members of the BSC, which “sends a message” even though membership alone is essentially a matter of an application and payment. They also ask for copies of risk assessments for specific tasks and any permits-to-work that are needed (for example, a hot-work permit). They do not ask a potential contractor how it involves staff; once they ask the basic questions, they “very quickly get a feel for the type of organisation they are dealing with”. The Livingston outlet has service level agreements with the contractors that are reviewed periodically. The centre management also reminds the contractors that they have the main duty of care to their own staff.

McArthurGlen’s three main contractors have access to its intranet system, which includes a facilities section, for the outlet. This allows the outlet to disseminate information and provides the contractors with access to the company’s health and safety documentation, policies and procedures as well as an e-learning package, which covers general retail, customer service and health and safety guidelines. The intranet also gives the contractors the facility to make suggestions, but the uptake has been poor with the contractors’ representatives preferring to use committee and face-to-face approaches.

**The safety committee**

Despite the group’s policy of holding health and safety meetings quarterly, Livingston had always held its meeting on a monthly basis. During the most recent corporate review of the policy, Jim Bradley worked with head office to secure a bi-
monthly meeting for Livingston. Quarterly meetings, he believes, would be insufficient for Livingston: “You need to
reinforce and continually communicate on a regular basis”.

There are five committee members at any one time, some of whom “rotate”, thereby increasing the scope of experience
within the committee by involving new members with different skill sets:

• Jim (chair), who rotates with the centre manager (Bryan Barbour);

• Karen (who takes minutes and presents the KPIs), who rotates with a member of her team, Jackie McIntosh, who is now
becoming the “lead” as part of her personal development plan (PDP – see below); and

• a representative from each of the three main contractors. Jim and Karen ask that the cleaning representative be the site
cleaning manager, who will often bring a cleaning supervisor. They also stipulate who the representative should be from the
other two contractors.

Each of the contractor representatives is responsible for cascading the information from the meetings to their staff;
McArthurGlen does not involve itself with the actual cascading, but Jim does require that they let him know how they have
done it and provide evidence that they have done so. Each contractor can inform its staff differently; the cleaning manager,
for example will use toolbox talks.

Having the contractors at the meeting is also useful for hearing about developments, and their implications, in areas that the
centre staff might not have expertise in: Jim, for example, mentions that GS Hall explained to the committee about the
change to the Gas Safe register from CORGI, and what it would mean for the centre. The committee has suggested several
documents for inclusion in the facilities section within magNET (the local intranet site that brand partners, contractors and
McArthurGlen staff use and view). The documents included a stress policy, the Work at Height Regulations, and a Disability
Discrimination Act access policy.

Jim and Karen also encourage the committee representatives to bring their area/regional and contracts manager to the
committee meeting, particularly because each meeting is either preceded or followed by a health and safety walk around a
specific area – the car park, control room or the mall, for example – and it is useful to have contractor managers who bring
“breadth and depth of knowledge in different areas and a fresh pair of eyes”. There is also an environment meeting with the
contractors every two months that is similarly preceded or followed by a walkaround, which will pick up health and safety
issues too. Every issue noted on the walkarounds – for example a broken light or floor tile – is minuted, with action
subsequently tracked.

Jim and Karen have encouraged brand partners to participate in the safety committee meetings through open invitation at
the bi-monthly tenant manager meetings, with Marks & Spencer and Nike being the first to take up the invitation. The trial,
says Jim, has proved “very interesting because it puts the client perspective into the meeting and makes us think of things
that are more client facing and that we might otherwise easily miss.”

Involving the tenants
The tenants have access to the same information as the contractors on the intranet system, although they cannot use the e-learning package. As with the contractors, the tenants are more likely to raise issues verbally at meetings rather than electronically.

Jim and Karen want to expand e-learning access to the tenants so that they train their own staff. They have piloted it with some of the tenants and have the buy-in from and McArthurGlen’s own directors and HR. At the moment, however, the investors have put off a decision for 18 months because of the economic climate. To an extent, the good health and safety record is counter-productive here because the investors can’t see any further tangible benefits of investing in the computer upgrades that will be necessary to expand the package. They see it as a “nicety” says Karen, adding: “There are benefits”.

The McArthurGlen management has a general meeting every two months with the tenants that covers events within McArthurGlen and at Livingston – generally and marketing and facilities specifically, during which Jim ensures there is discussion of at least one health and safety issue and one environmental issue. At the meeting, he always asks for an increase in the number of health and safety issues that the tenants are raising; “we do”, he insist, “get feedback”.

The two-monthly meetings used to take place in the cinema. This, however, afforded little interaction as it had the atmosphere of a lecture theatre. The management team therefore split the tenants into three, resulting in smaller and more intimate meetings that encourage greater interaction and have elicited some good suggestions. One further effect of moving to smaller meetings is that the tenants said that they did not need to meet so frequently (monthly), hence the twice-monthly frequency.

Around the same time, the McArthurGlen management team discussed why attendance was so low. Concluding that the main information that the tenants needed from the meeting was details of the outlet’s monthly performance (because their own head offices ask them for this information), they decided to restrict the minutes of the meeting to the attendees. And, where a tenant had neither attended nor apologised, they emailed the area managers expressing their “disappointment” that their store managers had not attended. This, says Karen, “had a very positive effect in that the area managers, who may not have been aware of their managers’ non attendance, turned it around to ensure store managers did attend”. The attendance then rose to least 70% of the tenants, with 93% attendance at the last two bi-monthly meetings (ie at each of the three groups) with apologies received from the handful that were unable to attend.

One general benefit that Karen and Jim have seen is that the tenants are now addressing health and safety within their stores themselves. Involvement of the tenants at the meetings has also given rise to health and safety-related suggestions that McArthurGlen has implemented, including the four in the box below.

**BOX: IMPLEMENTING TENANTS’ SUGGESTIONS**

- The centre provides free parking for all staff on the sixth floor of the building. Two of the tenants said during a general meeting that the area, which is open to the elements, was too dark once the sun had gone down, and that they were concerned about the safety of their staff, particularly the women workers. McArthurGlen therefore replaced every second lamp with a higher lux bulb.
• The centre put in a drop kerb in the north services yard following a suggestion from some of the tenants’ workers. The drop kerb eliminated the dragging and bumping of the cages over a kerb edge, and reduced staff concern and the risk of a manual handling injury.

• Jim and Karen emphasise that it is important that the tenants believe that, if they raise an issue, then McArthurGlen will deal with it if it is within its power. The service yards, for example, use colour-coded bins for different purposes, so the six food court tenants on the first floor asked Jim and Karen to locate additional colour-coded food waste bins near them. The presence of these bins has helped McArthurGlen improve its waste management and environmental performance, but has also ensured that there are no inappropriate bins blocking any corridors from a safety and emergency evacuation point of view.

• A further recommendation from the tenants’ meeting concerned the tenants’ use of their own contractors. At one point, Jim and Karen would sign off all the health and safety documentation for all the tenants – for example, they would receive via the security manager up to 90 tenants’ risk assessments and other documents for signing off. Aside from the volume of work, it also meant they were signing off documentation for areas in which they were not specialists, for example refrigeration. But holding training sessions for the store managers allowed them to state that it was the responsibility of each tenant to ensure the correct documentation for any contractors it was using, and the tenants’ meeting suggested the current system whereby they supply permit-to-work forms confirming they understand the systems and have them in place.

The office

There is a weekly team meeting at 10am on Tuesdays for the 11 office staff, although not all customer service advisers will be able to attend, so they rotate. The customer desk representative will email colleagues with the main points and the minutes are circulated. The meetings cover everything, including health and safety, and will have contractors in attendance. The meeting includes an overview from the duty manager of the weekend, then each of the contractors on what has happened in the past week. There are also weekly management meetings at which Jim provides information on health and safety.

All staff have a personal development plan (PDP), which Karen uses, among other things, to increase the involvement of some colleagues in health and safety. The company wants its employees to “challenge and stretch” themselves; although their job profile might not give them a health and safety or environmental responsibility, the company will reward them for taking on such extra areas as part of their PDP. The outlet uses a RACI matrix (Responsible, Accountable, Communicate, Inform) to define the areas and establish who wishes to become involved in any health and safety tasks by taking on certain responsibilities. Karen also engrains into each member of staff that they have a duty of care.

Progress against a PDP is rewarded with a financial bonus and is measured against KPIs such as attending and taking minutes at the safety committee meetings, attending a RoSPA manual handling course, passing the BSC level one course (see below) and participating in walkarounds. “Why”, Karen asks, “would you not reward people” for doing this? They also give a £50 monthly customer service award (which can also go to contracted staff) – this, she says, has the added benefit of “helping keep things fresh” in a mature safety culture.
Training

Every McArthurGlen employee at Livingston must pass the level 1 BSC one-day course, be they a manager or customer-facing staff. Each manager (the centre manager, facilities manager, centre administrator, retail manager and marketing manager) acts as a duty manager one weekend in five – when they are effectively in overall charge of the centre – so it is important they have some health and safety skills. In addition to the BSC course, they have also attended external training, for example a RoSPA manual-handling course, risk assessment course and first aid course and have to be “signed off” by Jim on areas such as emergency evacuation.

Jim and Karen make it clear to the three contractors they would “prefer” it if their staff took the course too: to date, every member of the contractors’ staff has attended the course, and the contractors give paid time off in office hours. Several tenants have also participated free of charge.

Jim and the centre are accredited by the BSC as a trainer and training centre up to level 1, and he carries out all the training, which means that he has a relationship with the contractor staff. He will run a session, on average, once every two months, with up to 12 trainees. The course is prescriptive and covers the fundamentals – the law, risk management, fire safety, hazardous substances and work-related illness. In terms of engaging the trainees, he reports that the parts on stress-related illness, violence, and bullying elicit the most “animation”. At the end of the course, there is a 40-question multiple-choice questionnaire; the outlet had a 95% pass rate in 2009.

Livingston Designer Outlet offers the training free of charge. Originally, the BSC charged a £10 administration fee for each candidate, but this appears to have fallen by the wayside. The training, says Jim, “goes to the heart of getting people involved in health and safety” and, as such, “should be free at the point of need for the masses”. The enthusiasm, after attending the course, says Karen, can be “amazing”.

A recent example of the benefits of involving and training the contractors’ staff involved two cleaners who have learning difficulties and did not want to attend the training because they feared they would be intimidated and embarrassed in front of their colleagues, particularly during the test because they could neither read nor write. But, as duty managers, Jim and Karen knew both cleaners and so approached them directly, telling them that everyone else was attending the course and that they would take them through the exam verbally; in the event, one passed and the other failed but is retaking. The centre also asked the cleaners’ managers to give them toolbox talks. Jim and Karen see both the pass and failure as a success, and the cleaners said they felt “special”. The next dividend came early, with the first day of heavy snowfall in January 2010 when the two cleaners were the first on the scene, digging out the entrances and keeping them accessible with locally made wooden snow scoops, and then getting teams on each of the entrances; their health and safety training had allowed them not only to identify the hazard and prioritise the importance of keeping the entrances clear, but also to take the responsibility for implementing this. It was the same for the four other shift cleaners and maintenance person; they all acted on their own initiative before their managers or Karen and Jim arrived. The company has recognised this with a £10 gift card for each.

Providing information

In addition to the committee meeting and the intranet, McArthurGlen provides information via:
• paper and electronic versions of the fortnightly MG News, which has a facilities section. Recipients – store manager, cleaning manager etc – “sign for” their copy;

• a wellbeing notice board by the control room – contractor staff have to sign in and pick up their radio at this room. The board provides information on issues such as stress and violence, as well as McArthurGlen’s safety policy and printouts from organisations such as the HSE and RoSPA;

• a notice board in the McArthurGlen staff kitchen, where Jim and Karen put corporate policies and minutes of meetings. The majority of the board is used for health, safety and wellbeing issues;

• tool box talks and briefings, handbooks, data sheets and written instructions, permit-to-work systems, email and video/DVDs; and

• posters everywhere remind workers of the safety first” message.

Getting views

The two-monthly meetings of the safety, environment and tenants committees and the intranet aside, the centre also obtains views of the workers and the public in other ways:

• Jim and Karen walk around the outlet themselves, talking to tenant and contractor staff as well as customers (in addition to the committee walkarounds).

• The centre uses employee opinion surveys and questionnaires, confidential reporting lines and anonymised reporting systems, “whistleblowing” to senior managers and behavioural safety programmes.

• The customer services staff receive comment cards, which can be about anything, and respond to comments within 24 hours and provide a monthly analysis for management. The cards can result in significant improvements, for example, a suggestion for high-powered hand dryers resulted in Jim installing new Dyson “wiper” dryers in the rest rooms. Karen emphasises the importance of customers seeing they take concerns seriously: historically, the outlet did not do this but she believes that, aside from the ethical and any legal imperatives, there is a clear business benefit in customers believing that the outlet is a safe environment.

• The involvement of workers during a disability audit helped reveal two issues. Firstly, although the outlet has a large amount of seating, none of the seats had arms, which makes it difficult for older customers or those with disabilities to get up. So when McArthurGlen replaces the seating over the coming year, it will ensure a proportion of the seats have arms. Secondly, the outlet had only one lift, which would have proved problematic had it broken down, so Jim and Karen recommended a second lift to the investors (the owners of the site), who gave the go-ahead at a cost of £100,000.

Consultation matters

McArthurGlen and, as appropriate, the centre, advise they consult workers on: periodic revision of the health and safety policy statement; development of health and safety management systems; setting of strategic priorities and improvement targets; selection of competent persons and other health and safety services; task or subject-specific (but not generic) risk assessments; selection of control measures and/or safety equipment; specific policies/standards/procedures; incident and
complaints investigation procedures; monitoring procedures; health and safety implications of future plans, including the introduction of new procedures, work processes, equipment or product; occupational health and well-being; and first-aid procedures

Karen adds she is satisfied that their arrangements comply with the Health and Safety (Consultation with Employees) Regulations 1996, although they add that given the extent of involvement at the centre, she believes the current law is “neither a help or hindrance”.

Benefits

Examples of the benefits of engaging contractors, tenants and staff are described throughout. Overall, the involvement of the contractors has, says Karen, definitely had an impact on the contractors’ staff; “They will say we are approachable”, says Karen, “and they almost see us as their employer. Brian – the centre manager – can walk out into the mall and people will talk to him; we have empowered them to come back and talk to us. For example the food court staff told Jim they did not like the uniform, so he talked to the contractor about dealing with this.”

Engagement – in general and in particular in health and safety – has also had an impact on worker morale and contentment, says Karen. The staff turnover is less than 4% in any area. In terms of office staff, all but two managers have been at the outlet for three to 10 years. She suspects that it is the same with the food court staff, which probably retains 40 staff who were there at the start, and there are six contractor staff who have been with the outlet since 2000. The security company and GS Hall do not tend to move staff around, although the cleaners can get moved.

Proving a direction correlation between workforce engagement and a falling injury rate is always problematic because of the multifarious factors that will be involved and, in the case of Livingston Designer Outlet, there have been just two reportable injuries (RIDDORs) in the past 10 years, which does not allow a demonstration of an improvement (both injuries involved the same contractor in falls from ladders four and five years ago, resulting in a dislocation and broken bone). There is, however, a year-on-year decrease in the centre’s overall injury rate, with 53 incidents in 2007/08, compared with 73 in 2005/06. The total includes any injury and arises mainly from slips, trips, falls, alcohol, faint and car park incidents involving customers (just two related to staff working in the centre). None of the incidents was reportable under RIDDOR, but Jim will still ask the tenants and contractors’ meetings: “How are we going to reduce these?”

The centre advises that while it encourages the tenants and contractors to report near misses, there are few reports, which it attributes to now having appropriate safeguards and culture in place rather than under-reporting. They send any near-miss reports to head office and to the other outlets.

The main challenges ahead are the small things that Jim and Karen can’t foresee; the most notable incident in recent years occurred one night after some youths took a small, non-flame retardant cushion from a trader’s cart, kicked it down the mall before settling light to it, causing £30,000 of damage.

Their experiences have led Karen and Jim to conclude that there are no significant barriers “whatsoever” to effective involvement and consultation that cannot be overcome to involve effectively your workforce in health and safety”. The main lesson they would share is: “if you believe in employee involvement, then you involve and consult with your workforce
as a matter of routine, which makes employee involvement not only an everyday routine but a rewarding experience for everyone that is involved.”

**BOX: WORKERS SUGGEST REDUCING SMOKING SHELTERS**

The risk of fire led McArthurGlen to introduce a smoking policy several years before the Scottish parliament banned smoking in enclosed public spaces. “We had to build this up over a period of time”, says Karen, “communicating it in a positive, not negative, way, using the good rapport to persuade the staff that it a benefit to them as well as to the outlet. The outlet initially intended to provide two smoking shelters in one area away from the shop floor (thereby also improving the image and cleanliness of the centre). But, says Jim, “it came back that I was over-providing”, so he put in a single shelter, thereby saving £1,500.

**BOX: CRIME REWARD**

In 2009, Livingston Designer Outlet won a British Retail Consortium and Home Office “Safer Shopping Award”. Working closely with West Lothian and Borders Police and tenants at the outlet and in the town, Livingston developed an information sharing database, which Jim believes “will create a safer environment that will make staff in the building feel more comfortable and safe in their working environment”. The police also did a session at the last tenants’ meeting, including crime prevention audit and training in crime prevention for tenants.”

**BOX: ALCOHOL**

Alcohol is a significant concern: in 2006, one of the outlet’s two pubs was not, says Jim, “being managed as effectively as it should have been”. Although Karen made it clear to the pubs that they were responsible for risks arising from their business, she was equally clear that the outlet had “to take ownership of the problem because it had implications for the centre and its customers”. They worked hard with the management of the pubs at the centre but also involved the senior management of the pub company, the police officers responsible for the licensing of the premises and pub’s the door company on site. Talking to both companies and the bar and door staff identified that the majority of problems occurred between 12pm and 1am, so the centre agreed with the pubs that they would not admit anyone after 10pm (many of these clients would have been drinking, even thrown out, elsewhere). They put in new procedures and saw a dramatic reduction in incidence.
APPENDIX 4: TIMBMET SHIELDHALL CASE STUDY

In the past four years, Timbmet’s Glasgow Shieldhall site has experienced a “full package” of measures aimed at improving its health and safety culture, notably around communication and worker involvement and in empowering and supporting the health, safety and quality assurance (HSQA) manager, Alan Galloway. Although Alan is the first to admit there is still a long way to go, the timber site has seen:

- a halving of reportable injuries over the past five years, with just one incident between July and September 2009;
- a halving of minor injuries between 2005 and 2009;
- the elimination of frequent causes of accidents;
- an increase in the willingness of the workforce to report near misses;
- an increase in workers’ awareness of health and safety and its relationship to the business;
- low staff turnover;
- a new safety committee structure representing all parts of the site;
- all risk assessments and safe systems of work are now communicated verbally in the form of tool box talks; and
- a perception that it is easier to approach site and group managers about health, safety and welfare issues.

Timbmet

Timbmet is a private sector company that imports, stores, machines, treats, sells and distributes timber and timber products. The company was formed in 1942 and is still owned by the family of its Czechoslovak founder, Ludwig Kemp. The company has around 400 employees and reports an average annual turnover over the past three years in excess of £100 million (that for the Glasgow site alone averages in excess of £40 million). In recent years, Timbmet has won Timber Trader of the Year as well as General Trader of the Year, Hardwood Trader of the Year and Panel Product Trader of the Year. Timbmet is a member of the Royal Society for the Prevention of Accidents (RoSPA), the British Safety Council (BSC), the Timber Research and Development Association (TRADA) and the Timber Trade Federation (TTF).

Timbmet runs a “Centre of Excellence” for “sharing our knowledge for the betterment of the industry. With a wide range of on-line training courses, we are able to involve our workforce in all aspects of our business, and we offer seminars and courses for interested outside agencies.” The company emphasises its environmental credentials, advising that its “commitment to meeting economic, social and environmental responsibilities extends throughout the supply chain to all our stakeholders – our environmental policy colours everything we do.”

Health and safety in Timbmet

Timbmet has two full-time HSQA managers – Alan Galloway at the Glasgow site, and Peter Feakes in Oxford. Just 18 months ago, there were three HSQA managers and a group health and safety manager, but the closure of several sites led to the loss of the group manager and one HSQA officer. One of the directors on the Timbmet board has responsibility for, among other things, health and safety.
Although Alan is salaried from the Shieldhall, and not the group, budget, he nonetheless carries out work for the group, writing the generic assessments and guidelines that the branches are responsible for implementing. Peter deals with the branches on a day-to-day basis and audits them, including to ISO 9001 (quality management). The two HSQ managers inspect each other’s site once a year and carry out in-house training.

In addition to site safety committees (see below), Timbmet has two health and safety forums at group level:

* a quarterly group meeting of the two HSQA managers and the board member responsible for health and safety, Brian Leathert. This meeting deals with health and safety issues in a broader context, for example training at all levels and the health and safety action plan; and

* an ad hoc health and safety awareness meeting (see below).

**The Glasgow Shieldhall site**

Timbmet acquired the Shieldhall site in 1996. It is situated on an industrial estate near the Govan shipyard, in the suburbs of Glasgow. The site currently has 84 permanent employees, a drop from 125 in 2008, due to the recession and, in particular, the decline in housebuilding. The site has no temporary employees and uses contractors only “as and when required”.

The operations departments at Shieldhall comprise: a main yard (everything from goods-in to lorry-loading); a production department; a distribution department (transport and HGVs); and health, safety and quality assurance (HSQA). The marketing and most of the purchasing and administration is done centrally, although there is some local purchasing and administration on site.

**The practitioner**

Alan Galloway started work on the Shieldhall site now owned by Timbmet 26 years ago, straight from school. Although he worked for a nearby company for four years, he came back to the site in 1998 when Timbmet bought his then employer, as well as his first employer. He has worked his way up to HSQA manager from sweeping the floor and making tea, through work in the mill and as the transport manager’s assistant. He worked in the site’s central “progress department”, which collated paperwork from all the departments, providing him with a background in each area and allowing him to see “how they all linked together”. He subsequently worked as a yard foreman.

Four years ago, risk assessments at the Shieldhall site were basic and, with 125 people on site, Timbmet realised there was a “big gap”. Gordon Tennant, who was Alan’s previous manager at the nearby site and who had also moved to Timbmet, asked him to take responsibility for HSQA. Tennant, who is now Timbmet’s director for Scotland, says the “importance of HSQA and the scale of our business [meant] it was essential that we created a full time position that was an integral part of the day-to-day functionality”. Tennant continues to show the site workers how seriously he takes health and safety by attending the site’s health and safety committee (see below), by meeting with Alan each week, liaising with departmental managers to check progress on health and safety actions, and carrying out daily site inspections where improvements or concerns are discussed with employees at all levels.

The HSQA role, says Alan, has since “grown arms and legs” and is a constantly evolving “jigsaw”, in which he fits the pieces together and sees how they have an impact on each other. Alan, who had also been the site workers’ representative at
Glasgow and so involved in health and safety, then secured a level three health and safety qualification. He was, as he points out, “one of these men” for many years, which aids approachability and understanding.

Since becoming HSQA manager, Alan has attempted to move the site away from an emphasis on tick-box risk assessments and legislative compliance towards a change in culture and the integration of health and safety into the wider business picture. This, he stresses, is matter of evolution, pointing out that, at the least, Timbmet was ticking the boxes five years ago.

**Safety committee**

The Shieldhall site has a safety committee (“panel”), which Alan chairs. It has six other members, including representatives from all parts of the site: administration and sales; production; an HGV driver; and yard/maintenance. (The committee had a components’ representative until that department closed in 2009.) The four representatives are all volunteers, albeit some who Alan sought out because he thought they would do a good job; there are no elections. Ideally, he prefers representatives with a “bit of fire”, the confidence to raise issues and the desire to see things change and done the right way.

The composition and nature of the panel differ from its previous incarnation in late 2008. Having observed the panel for several months, Alan believed that while the committee was an improvement on previous years, it would benefit from further refinement, including some additional “fresh blood” and the addition of more workers who were “doing the job”: the 2008 panel, for example, did not have representation from the HGV drivers or production.

While the previous panel had four managers as members, the current version includes just Tennant and the group production manager, Donny McLean. Alan is clear that the committee has benefited from fewer managers attending less frequently, and that there is a “different dynamic” when the two senior managers attend. The two managers recognise this and are happy to stay away when the committee wants to discuss matters without their presence. Nevertheless, they do attend whenever there are issues that Alan wants them to hear” and their presence does send an importance message to the workforce. In practice, they do not attend all meetings, with Tennant attending every third or fourth meeting and McLean four in five meetings. Tennant believes the committee meetings “have provided a solid base to work from and have proactively engaged the wider workforce, who are now confident and comfortable coming forward with concerns and ideas”.

The committee meets every six weeks, usually for 60–90 minutes. This was a strategic change from the 2008 version, when meetings took place monthly over lunch and lasted far longer. The set agenda for each meeting covers: minutes of the last meeting; points from panel members; accidents; statutory issues; general health and safety; environment; first aid; and general emergency issues. Within this framework, the last meeting discussed: lightning inspection and repairs; new extraction equipment; a one-way system with automatic shutter doors in the mill for forklifts; “sweepers” to make sure everyone is out of the offices when an alarm goes off; fire extinguishers and training; and back-up evacuation procedures should the sirens fail. These topics, says Alan, are typical of a meeting.
In addition, Alan will normally have an informal word in advance with some of the committee members if there is something particular he wants to discuss and on which they should consult their colleagues. All the representatives have access to email, regardless of where they work on the site.

The panel is still evolving in terms of structure and scope; it retains a tendency to be a “reporting workshop” at which the representatives bring up problems that should have been dealt with on the shop floor, although this is also the positive result of the representatives consulting their colleague before the meeting about whether there are any issues they want raised. The company, however, wants the panel to move towards considering issues such as changing the culture and the policies it will need to do this. In the longer-term, Alan wants a culture where, for example, health and safety maintenance issues are raised with the maintenance manager and not with the health and safety manager. This, however, will also require further training for the line managers.

A representative’s view

Chris Miller, an assistant production controller, has been with the company for two and a half years and has been a representative for almost a year in that time. He volunteered as a representative after the previous incumbent relinquished the role. Chris reports that he has enjoyed the role because it has afforded him “an insight into how the whole site runs and what the other departments are doing”, which “changes the way [he] looks at things.”

Chris represents 21 people from the mill. They are able to see him at any point, but he proactively seeks comments before the meeting. Following the meeting, he provides feedback to the individuals who have raised an issue. Chris emphasises that where the company rejects a concern or suggestion, he will explain the reasons: the fact that the company has taken the worker’s suggestion seriously, rather than acted on it, is often the important factor. He also puts the minutes of the meeting on the notice board. In a six-week cycle between meetings, he will spend roughly 30 minutes eliciting views and a further 30 minutes dealing with issues. He also speaks frequently to Alan informally, be it for advice or to ask questions.

Chris believes the committee works well and does not need significant changes, although more training would be helpful. He is confident that no one is deterred from raising issues and that he is representing the views of his colleagues, even when he disagrees with them.

Employee forum

Timbmet has established an employee forum to communicate with the workforce on issues affecting the Company and its employees including stock profiles, welfare facilities, and health and safety; a separate consultation group was proposed at the forum to consider pay and benefits. The Glasgow site had six representatives from the yard and office on the consultative process that led to the forum. The new body, says Alan, “is all about how to move company forward and we now have a say in it”.

Although the forum is unlikely to have an impact on the technical side of health and safety, it is already looking at engaging the workforce. The forum decided to raise health and safety awareness through the group – a notion that was to an extent already present in the health and safety action plan – and so established a health and safety awareness group meeting, comprising the two HSQA managers, the board director responsible for health and safety and representatives from
marketing and HR. The group, which meets on an ad hoc basis, has introduced a health and safety suggestion box scheme and a group health and safety newsletter (see below).

**Surveying the staff**

The awareness group also adapted a general Timbmet staff survey into a health and safety questionnaire, asking participants to indicate the extent to which they disagreed or agreed with several health and safety statements. Timbmet sent it to 200 operations workers in October 2009, eliciting a 50% response rate (from 25% at one site to 80% at Glasgow). The Glasgow culture meant that, while “voluntary”, participation was “expected”. The questionnaire survey was paper-based, although people could submit intranet returns. (Alan had learnt from a relatively low response rate to an online health survey two years earlier (see below).)

Of the respondents, 16% were positive about health and safety, 8% negative and the remainder “middling”. Timbmet then circulated nine further questions in January 2010, requesting specific examples in the areas that had drawn the most negative responses. Although Alan does not expect the initiative to throw up issues that the company was unaware of, he believes that it will provide evidence for taking things forward; it also allows the company an opportunity to demonstrate that it is taking the views of its staff seriously.

HR also recently ran a general questionnaire asking all the staff about their perception of Timbmet, their hopes and ambitions, and where they believe the company could improve. The company has not yet published the results. Although not concerned with health and safety specifically, the questionnaire has furthered the impression of a company that seeks views and discussion. And while anonymous, all participants received a raffle ticket for prizes such as Christmas hampers.

**Providing information**

Alan believes that the legislation governing worker consultation is “sufficient. Legal obligation cannot produce a positive health and safety culture but does provide a framework for any business. Failure to comply may result in prosecution and occasionally this provides additional incentive to improve continually.” In striving to improve communications at the site, Alan has sought, and found useful, information from the HSE, online and paper HSE guidance, other official guidance, other published sources, trade unions, RoSPA and other safety organisations.

“One of the strengths of this company is that everything is communicated”, Alan says. The main means of providing health and safety information to the workforce at the Shieldhall site are notice boards, toolbox talks and training (including power point presentations). The company also uses: point-of-work risk assessments; bulletins/news sheets; data sheets/written instructions; permit-to-work systems; direct mail/email; and intranet/e-bulletins.

Timbmet has health and safety notice boards throughout the Shieldhall site and Alan encourages staff to look at them. Although he cannot be sure they do so, he points to comments about what is pinned on the board as evidence that they are read. He uses the HSE’s “myth of the month” as a way of attracting attention to the boards: “You have to keep health and safety as part of their job all the time for managers and workforce, and the way you do this is by keeping things visible.”

Essentially, communication is a matter of “horses for courses.” The yard workers have only limited access to computers, so Alan will print off hard copies of important briefings and bring them into his office in groups of four or five and talk to them
– particularly for the higher-risk tasks and occupations. Electronic communication is more relevant to the office workers. But whether he communicates electronically, verbally or by paper, he always secures a signature from the recipient – both as a record of having provided the information and a way of making the recipient take notice of the information.

Timbmet produces a group health and safety newsletter, which also came out of the forum’s health and safety awareness group. The two HSQA managers supply the information for the newsletter, although it is produced by the marketing and HR departments. The next issue of the newsletter will provide the location of all the suggestion boxes. Although the newsletter is in an electronic format, it is printed out and placed on notice boards to allow workers without PCs to read it. Generally, company emails remind managers to ensure that those without PCs also access information. The company also produces *Timbmet general news*, which covers all issues related to the business.

**Getting the view of the workers**

Alan Galloway is clear as to the benefits of consultation, which, he believes, will “result in improved decision-making, ownership of such decisions and resulting increased commitment.” The company advises it consults on many issues. Nearly all consultation will take place through the six-weekly safety committee meeting; there is no formal mechanism for consulting each member of the workforce individually, although toolbox talks do elicit views. The company is less inclined to consult on issues that it considers are strict legal responsibilities or where there is no relevant expertise among the workforce. Even here, however, Alan would respond to any comments that were proffered.

Alan does, however, ensure he has direct contact with the workforce and seeks the views of workers on issues that directly affect them: it would be remiss, he explains, not to talk to a machine operator about machinery, although he doubts the workforce would be interested in talking about company health and safety policy statements. “The answers”, he says, “are always out there and there are guys who, as you walk by, will say ‘why don’t you do x, y and z’”. These, he says, “are exactly the kind of people you want on the committee – people who are able to think outside the box but are not complainers”. But he also appreciates that some of these individuals are “not the committee type”, so the company needs other ways of involving them: the first thing he does each morning and afternoon is to walk around the site. He will also ask for views during risk assessments and toolbox talks. In short, he “knows which people to ask”.

As a result of the forum, employee suggestion boxes appeared at Timbmet sites towards the end of 2009. At Glasgow, the box is seen very much as an add-on to existing means of gathering information and one that is unlikely to elicit many suggestions. And while the company does not use “documented” confidential reporting lines to senior managers, it is something that is “certainly encouraged”.

**Bearing fruit**

Soon after becoming HSQA manager, Alan Galloway ran a health survey as part of an attempt to secure a Healthy Working Lives (HWL) award – the Glasgow site won a bronze award – partly because he believed he “had to score goals early on” in his new role. He was also “acutely aware” that he had to “reinvent” himself. “You have to change, and people have to see you change, and sometimes the change has to be so dramatic that it has an effect. How do you stop being the boy that many of the men saw growing up?” He used a £500 HWL grant to run a healthy eating campaign with fresh fruit delivered – and consumed – daily for six weeks. Bringing in the fruit, although “daft”, made his colleagues see him differently.
Although the Glasgow site has not pursued further HWL awards because of insufficient time and resources, the initiative appears to have been highly beneficial. It also helped with health and safety more generally because it required the company to have in place specified policies and procedures, thereby allowing Alan to question the established policies and run awareness campaigns on the notice boards on issues such as men’s health. The Glasgow site also considered corporate membership of gyms as part of HWL but was unable to secure sufficient support among the workforce.

The site introduced a smoke-free policy along the lines recommended by HWL, becoming the first smoke-free site within Timbmet. Introduction was simple because it was a legal requirement – and the site was a timber yard! – but there was no consultation. The site offered information and encouragement, but not help, on stopping smoking.

Training

Health and safety training remains very much a work in progress. In the past, training for employee representatives and managers, supervisors and team leaders has, acknowledges Alan, been “very basic”. All training to date has been conducted in-house, but Timbmet is holding group-level talks with the British Safety Council about the provision of training, and is also considering a behavioural safety programme. Alan says that Timbmet has always been positive about releasing staff for training. The company now has a three-to-five year training action plan, of which health and safety is the first part and will cover induction through to specialist training, as well as training for line managers. Training to date includes first aid, forklift trucks and manual handling.

Some of the current representatives have not yet received the basic in-house training undertaken by all the managers, which Alan attributes to the fact that the representatives have changed since he last ran it. He hopes this will be completed by the summer 2010, but certainly within 2010. Where feasible, he runs joint training for managers and representatives; the content of the course is in any case the same for both, and covers: fundamental responsibilities; policies; safe systems of work; competent persons; accident investigation; safety meetings; and precautions – fire, emergency response, first aid; and claims. The benefit of shared content is, says Alan, that “everything is transparent”. There is, however, no training in how to be a representative.

Playing politics

Committees and procedures aside, one of the most interesting aspects of how Timbmet attempts to engage its workers is the flexibility and practicality of the approach – the emphasis on “getting it done” as a normal part of doing business – which stems largely from Alan’s range of experience within the company. Likening himself to a “politician”, he explains: “How do you take a good idea from the shop floor and get it implemented? Management on the whole likes to think that good ideas belong to them and that they are the driving force behind what is happening. So a lot of the time, you are playing politics, looking for a compromise to improve things. You can never improve anything overnight; sometimes you are just looking for scraps knowing that, three months down the line, it will allow you an outlet … and you’re negotiating between departments, knowing that if you want things done a certain way it is going to require extra work.”

Alan is “constantly mindful of the fact that people don’t see things the way I see them.” The Timbmet staff have “deadlines every single day”; many “are here for jobs not careers and their sole interest for being here is money. While there is
absolutely nothing wrong with that, you need to play on that if you have to change them and bring them out of their comfort zone for the benefit of the company."

What a manager cannot do is to tell an employee that a change “will make your job harder, longer and more pressurised, and you will get nothing for it’. Standing over the worker and using disciplinary procedure is not the way forward. You need people to buy in to what you are trying to do. How you do that is the politics of it.” There has, in the end, to be “something in it” for the workforce. Although academic research indicates that incentives are generally not appropriate for health and safety, he believes an employer needs to be clear: “This is why we want this done and this is what you’ll gain from it.” Line managers similarly need convincing; in addition to the incentives above, Alan reminds them of the legal implications of not fulfilling responsibilities.” At the same time, however, Alan has to persuade Timbmet directors to provide the resources to secure these gains.

“We’ve not nailed this yet …”

Alan Galloway believes that a lot of what the company needs to do next is already in hand, particularly the training that is needed to:

* improve the knowledge and education of the individuals on the safety panel; and

* increase the involvement of line managers, educating them as to why health and safety is important to their role (doing their job and the legal, moral or economic ramifications of getting it wrong).

There are other issues that are more difficult to crack: “A low turnover in staff at the company, whilst on the whole a positive, does tend to create pockets of resistance to change,” says Alan. “This has been identified at employee and management level.” Of the 84 people on site in Glasgow site, all have been there for at least two years with many on the site since the 1970s. Although such retention levels afford the benefits of experience, knowledge and loyalty, they can also leave an “old way of thinking” that envisages a core business with “everything else [including health and safety and quality] separate”. At the same time, the potential benefits of getting these older “informal leaders” on side are enormous, and Alan makes special efforts to do this and then to persuade them to help with workers who are slow to get the message.

While recent years have seen a decrease in the number of accidents at the Glasgow site, and an increase in the levels of reporting of near misses (the company introduced an incident reporting form), Alan’s “instinct” is that the site is still not capturing “half the near misses”, for example fork lift trucks clipping the racking. This remains a challenge, and one that he thinks is best addressed with education and incentives to report near misses: “You can’t make an established workforce believe in just three years that they need to report a near miss. It will be easier with the next round of line managers that are coming up through the company because they have learnt [about health and safety] at school and are more open to that kind of culture.”

Discussing what might help improve worker engagement, Alan Galloway believes there is sufficient theoretical information available. Two things that would help, however, are:

* training – at all levels of the workforce; and
* the chance to see how other businesses have engaged their workforces – practical solutions, particularly on the basis of size (which is just as important as industrial sector).

He cautions, however, that when looking at support from external bodies to promote involvement, cost will always be a consideration – particularly in the current economic climate. At the same time, he believes that “coming out of the recession is a good time for companies like Timbmet to refocus and look at itself and, while health and safety, is not at the top of the agenda it will be there. We’ve not nailed this by any means but you’ve got to have a plan.”
APPENDIX 5: SUMMARY OF WORKSHOP FINDINGS

The points below are those on which there was either a large amount of agreement among participants at the four workshops held between 30 November and 3 December 2009, or that are worth noting as being potentially significant. The following three appendices summarise the notes taken at the workshops.

• There was no overall consultation picture, with the extent and attitudes influenced by organisation size, sector, history, culture, parent companies and active unions.

• Formal and fuller consultation was, unsurprisingly, most developed where some workers were represented by recognised trade unions and those unions were active. There was also some evidence of enhanced consultation and expectations where there was previous knowledge of, or contact with, positive union involvement.

• There is very little “joint decision making” in the literal sense of the phrase, but there is evidence of consultation – formal and informal – that facilitates decision making, even if not all participants would define it as such. Most of the consultation takes place on task-centred rather than strategic issues, for example, the choice of PPE would generally be seen as a desirable issue for consultation, whereas the drafting of a safety policy would frequently not.

• Most participants wanted to see an increase and improvement in worker consultation and involvement, but a significant minority questioned whether there was a genuine desire for it among managers and directors. A minority also questioned whether it was that important an issue for employees.

• There is a need to look at, and explain, not just what is being consulted on, but why the company is consulting. Linked to this, participants believed that there is a lack of convincing information and case studies on the “why” and that the business case for consultation and joint decision-making needed significant improvements if it were to convince senior management.

• A significant number of participants believed the level of “engagement” was greatest between shop floor workers and decreased progressively up the management chain.

• Many participants highlighted the effects of the recession on consultation, in that it had forced it off or down the agenda. They also advised that pressures of time and resources meant that consultation often did not occur.

• Most OSH consultation appeared to be a discrete activity, ie it was not usually integrated into wider HR activities, even in smaller organisations. Conversely, there was a good deal of support for approaching OSH engagement within a wider HR framework.

• There were no constant organisational barriers to consultation; some participants said they experienced none, but others cited variously problems at different levels of the organisation. There is agreement that OSH consultation is very difficult without CEO involvement (although there were some interesting examples of “working around” a lack of enthusiasm). There was a need for clear communication between the managing director and the next level of management down the chain.

• The “approachability” of first line supervisors and an “open door” is important for eliciting the views of employees.

• There is widespread eliciting of views on an informal and “walk around” one-to-one basis.
• Where employees made suggestions or raised concerns, there was unanimity around the importance of being seen to take the comments seriously, understand them and try to address them. Some participants felt that it was also important to address them successfully, but others believed the process, rather than the outcome, was of paramount importance. There was also unanimity that feedback is vital following consultation or suggestions, although not all participants appeared to do this.

• Many of those who enjoyed a degree of successful consultation emphasised that it takes time to get going and even longer to realise some clear benefits. That said, there were few clear examples of obvious benefits arising from consultation (although many said they knew they did exist).

• Several participants said they would be interested in seeing how other participants had dealt with consultation.

• Several participants mentioned, unprompted, that the HSE’s Hidden Killer asbestos campaign had elicited significant response from the workforces and heightened their interest in OSH.

• Few participants had seen the diagrams and models used by the HSE and others to illustrate worker engagement, involvement, participation and consultation. No participant indicated that they found these representations useful (some said they were confusing or incomprehensible).

• A number of participants said that OSH trivia, and its portrayal in the media, is getting in the way of persuading workers and directors to take OSH seriously. Several criticised the HSE’s “Myth of the Month” initiative as counter-productive in that, whatever its intentions, it was feeding myths into the public consciousness.

• It became clear over the course of the four days of the workshops that there was a significant need among the participants for “soft skills”, even though the term itself was not initially well recognised. There was also a consensus that the use of soft skills underpinned the transformation of the workforce from one that is “involved” to “engaged”, and that the use of soft skills could make the difference between a “good” manager and a “bad” one. Most companies were using soft skills to some extent, but not formally or strategically; nor had they recognised the added value that the application of these skills could bring. Most organisations recruited people for their ‘hard’ skills and had not considered including soft skills as part of job competencies. Some respondents noted that those in an organisation without authority – such as safety advisers and those in HR – had more highly developed soft skills, and that the same could be said of any negotiator.
APPENDICE 6: NOTES FROM WORKSHOP ONE

The notes below record points made by participants during four days of workshops on “what works in worker involvement” in Aberdeen, Stirling, Edinburgh and Glasgow between 30 November and 3 December 2009. There were three discussion tables; these notes are from the table that considered “from involvement to engagement”. The contributions are anonymised, and the table was led by Roger Bibbings in Aberdeen and Stirling, and Tony Reynolds in Edinburgh and Glasgow.

The table looked at the following questions: “what does it take to move a worker (or contractor) from just being formally involved in OSH management to being really engaged and going the extra mile to help deliver safe and healthy working; what are the drivers; what are the inhibitors; and how can we enhance the former and overcome the latter?”

ABERDEEN – MORNING SESSION

• Initial training and information set out the expectations of managers and key colleagues.

• Contractors and remote workers, however, may have difficulty in getting the message.

• “Visible felt leadership” by managers at all levels sets the overall tone.

• Raising OSH issues needs to be a positive experience for workers with clear evidence that it leads to action. Making suggestions and then being involved in remediation helps.

• Transparency of approach is important. Workers need clear ‘line of sight’ to be able to assess the relevance of their suggestions. Flatter structures help in this regard.

• Wider safety awareness and safety education in schools/college and outside work helps to orientate workers.

• Workers need to believe in their organisation and receive acknowledgement and respect.

ABERDEEN – AFTERNOON SESSION

• Workers need to see as well as hear that managers value worker input. Managers need to prove to workers by their actions that they can speak up and that this will be valued.

• Visible feedback is vital to help prove to workers that their voice counts.

• People need to feel as well as know that OSH is important. “Searing experiences” (whether direct or indirect) can help convince workers that OSH is important, for example to convince them that it is worth doing things safely even though extra effort may be needed.

• People need confidence to be able to speak up and speak out. Mentoring may be helpful here.

• Involvement requires a good coverage of the basics as a good foundation but workers need the bigger picture too.

• OSH people must overcome ‘nurdiness’ with appropriate humour.
• High job mobility can be the enemy of safety as good safety attitudes learned in one location are eroded in others where there are lower expectations.

• Engagement must be manager led. Senior managers need to talk to frontline staff on a regular basis, but this requires good soft skills.

STIRLING – MORNING SESSION

• Training is important to get engagement but the focus needs to be on the why of safety not just the what.

• Site managers and particularly team leaders are key to getting workers to take OSH safety seriously and to always insist on safe working.

• They need to provide feedback in many ways to workers on their concerns; in training session, in toolbox talks and briefings etc.

• Age and experience are key factors. Older workers may sometimes be reluctant to adopt working methods they perceive as unnecessary but equally can act as mentors for younger workers and new starters.

• Experiential learning is the preferred route to getting maximum understanding, with a focus on the experiences of those who have had or witnessed accidents.

• Managers need to focus on workers’ perceptions of OSH, emphasising not just its seriousness but the benefits to them personally of taking it seriously.

STIRLING – AFTERNOON

• To secure employee engagement in OSH, managers need to widen the agenda to encompass environmental issues and quality as well.

• Managers need to take time to show/explain what the priority OSH issues in the business are.

• Involvement does not just happen spontaneously. It needs to be organised. It pays to have structured meetings, time outs, safety huddles etc.

• It pays to take workers in ones and twos on regular safety walk rounds. They get to understand issues of concern at first hand and can volunteer thoughts and suggestions.

• Managers must take all suggestions seriously, even ones they disagree with. They must invest time and effort in explain reasons why they might not take up a suggestion; not just dismiss it out of hand. To do so would damage workers’ confidence to speak their mind.

• Managers need to give workers time and space to get involved with OSH in their own way and on their own terms. This builds confidence and ownership.
• Seeing is believing. Maximum use must be made of worker involvement in business-to-business learning, especially in similar businesses with the same problems.

EDINBURGH
• You need to have face-to-face discussions and cut down on using e-mail.
• No need to have separate OSH meetings all the time; use standard business meetings for this.
• Never given enough time to do what is required.
• Lack of understanding of the benefits by all levels of management.
• Employees must be made to understand the importance of their role, for example telling a council carer that she should have the swine flu jab not just because of her health but to consider all the other people, inside and outside the organisation that rely on her to support them.
• Engagement must be continuous, not just as a flavour of the month.
• Need to understand the importance a person has – not just a title or grade.
• Must communicate and feed back the positives as well as the negatives.
• Recognition of those who have achieved at all levels, not just senior management.
• Be consistent in what you are doing and treat everyone the same.

GLASGOW
• Engagement must start from the top of the management hierarchy and be cascaded down.
• Targets must be achievable and in good time, as well as being resourced.
• Asking the employees what they want and how it is expected to work.
• Positive reinforcement.
• We have our drivers sign a pledge that they will drive safely so that they can commit to it.
• Everyone needs to understand that the achievements will be short term, mid term and long term.
• Knowing what they are to achieve and the benefits that relate to them and the organisation.
• Give the employees the chance to be part of the objective setting and have hands on.
• One focus delegate mentioned using anonymous questionnaires that were sent to the employees. The returns were a real eye opener and showed a major difference than when being asked face to face. They even had names of people who were not playing a part at all levels of the management.
• If it is going to succeed, then they have got to want.

• Management need to understand the culture of the workforce – where do they come from, what are their background sand beliefs as well as what language they speak.

• Use outside sources to communicate the message of health and safety – not just coming from the management all the time.

• Must be realistic for what you are wanting to achieve – not shooting for the moon.
APPENDIX 7: NOTES FROM WORKSHOP TWO

The notes below record points made by participants during four days of workshops on “what works in worker involvement” in Aberdeen, Stirling, Edinburgh and Glasgow between 30 November and 3 December 2009. There were three discussion tables; these notes are from the table that considered “soft skills”. The contributions are anonymised, and the table was led by Peter Wallace.

The term “soft skills” was not well recognised by most attendees but, once hard and soft skills were explained, there was generally good understanding and recognition.

All attendees agreed that the use of soft skills underpinned the achievement of moving the workforce from being “involved” to being “engaged”.

Most companies were using soft skills to some extent, but not as a deliberate action, and many were surprised that they had not recognised the added value that the application of these skills could bring.

Most organisations recruited people for their “hard” skills and had not considered including soft skills as part of job competencies; only three of those sampled did include soft skills in the job requirement outline.

The general opinion was that the application of soft skills should be a policy decision and driven from “the top”.

It was also assumed by many that managers already use these skills; after discussion it was agreed that not every manager did and that the use of soft skills made the difference between a “good” and a “bad” manager.

It was also recognised that there was more “engagement” going on between shopfloor workers and progressively less by degrees in increasing managerial levels; and that the impact of this should be considered in any future “models” of how to achieve engagement.

Issuing instruction ensures “involvement” but not “engagement”.

To be engaged requires both “interest” in what is happening and “desire” to be engaged by all parties involved.

It was also identified that those in an organisation without authority (such as safety advisers and human resources) had more highly developed “soft” skills; the same could be said of any negotiator.

It was also held that in order for soft skills to be effective, those practising them needed to be genuine and credible (the credibility coming from their hard skill abilities).

The general opinion was that “sustainable worker engagement” could only be achieved by nurturing cultural change, driven by enthusiasm and education of those in positions of authority as to the added value that soft skills bring.

It was felt generally that people’s soft skills could be improved through education and training; and that we all posses soft skills but are not always aware that we have and use them. Personality traits were discussed in relation to people’s ability to practice soft skills, as was an individual’s outlook.

Barriers to engagement (most from lack of the application of soft skills) as gathered from the discussion groups:

* fear;
• respect;
• age/experience;
• terminology;
• transient workforce;
• remote/peripatetic workers;
• cultural attitude in the workplace;
• no desire to engage by all parties;
• people don’t recognise what they are good at;
• managers not aware of the benefits;
• staff often seen as a number; and
• managers often too much under pressure to use soft skills easier to give out orders.

Opportunities for engagement and using soft skills

• during annual appraisals;
• through recognition; and
• through praise.
APPENDICE 8: NOTES FROM WORKSHOP THREE

The notes below record points made by participants during four days of workshops on “what works in worker involvement” in Aberdeen, Stirling, Edinburgh and Glasgow between 30 November and 3 December 2009. There were three discussion tables; these are from the table that looked at whether or not, and how, employers involved their employees in consultation and joint decision-making. The contributions are anonymised, and the table was led by Howard Fidderman.

Although there are 68 contributions listed, the number of participants was higher: a small number requested not to be referred to at all, and we have merged contributions from two or more representatives of the same organisation who sat on the same table.

In addition to the individualised points, there was consensus around a number of points, which we do not list repeatedly under each contribution for reasons of brevity:

- most contributors wanted to see an increase and improvement in worker involvement;
- there is significant consultation – of one type or another – on day-to-day task issues, even if the participants did not describe it as “consultation” or involvement;
- there is far less consultation at the more strategic end of OSH, with most participants believing it is simply not worth the effort;
- there is no joint decision-making on OSH, nor any desire among the participants for it;
- few of the participants were sure that they were eliciting the views of all their staff;
- an employer must show that it understands its employees’ complaints, comments or suggestions, and takes them seriously. It should always respond to them, even if it is not able to implement the desired changes (in which case, an employer should explain why not). Despite this consensus, a surprising number did respond to the employee; and
- OSH consultation is very difficult without CEO involvement, although there were allusions to how this deficit could be circumvented.

There were also a number of points that were made by sufficient numbers of participants to merit mention:

- clear communication between the managing director and the next level of management down the chain is important;
- managers are overworked and do not have time for consultation;
- the “approachability” of first line supervisors is important;
- line managers are often a barrier;
- although there is an assumption that staff want to be involved, this is not always the case – particularly where it might mean time away from securing targets and bonuses;
- the recession is important to the issue of consulting workers – it can be a positive as well as a negative factor;
• there is a need to look at not just what is being consulted on, but why the company is consulting;

• an “open door” is important;

• consultation can be problematic where large numbers of contractors and/or temporary staff are involved, particularly in construction and offshore;

• behavioural safety programmes were ineffective on construction sites with ever-changing workforces;

• OSH trivia is getting in the way of persuading workers and directors to take OSH seriously;

• the HSE’s Hidden Killer asbestos campaign had elicited significant response from the workforces; and

• there were significant problems dealing with the HSE and, particularly, the Connaught InfoLine service (at the same time, a number spoke positively of their dealings with the HSE, but not InfoLine).
ABERDEEN

1. Manufacturer – health and safety manager

• 66 employees (50 mainland Europe);
• family-owned business;
• no unions for OSH but Unite is involved in pay and conditions setting;
• have safety circles that are led by a worker;
• don’t have formal consultation;
• monthly inspections involving workers;
• toolbox talks;
• no skills training;
• two employees with NEBOSH training;
• decision-making is “organic”;
• “total case incident rates” are not a good target;
• originally, managing director was not interested in OSH or participation. But the manager’s previous experience resulted in him telling the MD that he needed to lead from the top. So now he delivers a toolbox talk;
• gets comparative data from the US;
• people in the office are not interested in OSH.

2. Offshore support – manager

• four onshore branches, 160 employees, with some working offshore;
• recently taken on responsibility for OSH;
• no unions;
• suggestion boxes, monthly meetings and training courses;
• currently driving staff to report back on near misses;
• trying to get staff involvement in risk assessment;
• the service director is i/c OSH overall;
• managing director “out of sight, out of mind”;
• made company tyre pressure a category on the expenses form;
• the “best thing” for raising the profile of OSH is tendering for work from large companies;

3. Offshore – advisor

• previous regulatory and industry experience;
• worker participation is important offshore;
• a main barrier to joint decision-making is finding the time to invest in doing it properly;
• the main barriers to worker engagement are leadership and organisational culture;
• there can be a “consultation paralysis”, and it is important to get the balance right;

4. Offshore platform operator – managing director

• two offshore platforms;
• OSH functions devolved to another company;
• 34 employees, all onshore, but financial liability for 500 workers in total;
• 80 workers on each platform;
• no unions;
• very concerned at lack of workforce involvement;
• there are workers who “collectively bargain” but they are not in a union;
• use OSH proformas and quarterly reviews at the highest level
• the periodic safety reviews are a heavy responsibility, during which “we insert ourselves into conversation with workers”;
• there is a “long distance” between the managing director and workforce;
• on trips, he will spend time with elected safety representatives – one of half a dozen ways of getting information;
• main task is to improve communication with workforce, although he warns that “too heavy a hand” can drive people away, so he focuses on reminding people what their roles are and asking questions;
• will share information on more serious injuries within the industry.

5. Energy – associate

• works with a large energy company, 1,500 staff;
• consultation through training;
• have safety and health industry advisory committees, safety groups and other groups;
• safety days;
• offer information on statistics and “lessons learned”.

6. Manufacture – health and safety manager
• 250 staff, non-unionised;
• moral, legal and financial reasons for OSH;
• “we need to get information and instruction to the workers”;
• “brother’s keeper” approach (worker should not “walk by” when they see an issue).

7. Logistics company – health safety environment and quality advisor
• 250 employees, mainly non-unionised (25% cargo handlers in Unite)
• formal systems for seeking views;
• quarterly “town hall” meetings – usually the same people;
• senior management meetings;
• monthly site meetings;
• monthly safety meetings, includes one unionised representative
• weekly team briefings;
• quarterly meeting of fire wardens and first-aiders;
• directors talk about things at a business level but are not on the shop floor;
• used some paper-based consultation for unionised workers.

8. Civil engineering – health and safety manager
• privately owned (EU company);
• non-unionised;
• 65 employees (1,000 employees on mainland Europe);
• OSH committee on each site, which meets fortnightly;
• there is “frontline communication” with contracting companies;
• OSH involvement promoted through intranet, face-to-face discussions;
• consultation where contractors are involved is very difficult;
• management culture in mainland Europe is “much flatter”.

9. Independent OSH consultant
• previously worked in major hazards sector;
• all organisations he has worked for have some kind of consultation, usually multi-level;
• without director support, consultation is a waste of energy;
• most employee representatives do not have the skills to contribute at a strategic level to OSH.

10. Housing Association – director of corporate services
• 100 employees;
• OSH working group;
• non-unionised generally, although there is “some collective bargaining” with Unison (a hangover from local authority days), but less on OSH;
• managers and team leaders are involved in OSH;
• audit covers OSH;
• senior management team meetings are followed by team briefings, after the results have been communicated to managers;
• communication with all staff has not been achieved.

11. Real estate – facilities manager
• huge US parent company;
• 2,000 employees in UK;
• with tenants, quarterly meetings but also daily contact;
• quarterly meetings with contractors, which cover OSH.

12. Construction health, safety and environment adviser
• 4,000 employees;
• each unit within the plc “has its own way of doing things”;
• weekly meetings cover OSH;
• UCATT safety reps are the general safety outlet, and the company “accepts this”;
• there is limited consultation, most of which is at site level;
• the culture of the industry means that most issues are dealt with by management;
• employees involved in issues such as PPE and traffic management;
• uses “no accident behaviour safety process”, which places individual responsibility on employees.

12. Offshore – OSH specialist
• thousands of employees in UK and abroad;
• non-unionised;
• “never sees one third of workforce”;
• use “Safety Observation System”, a tool that makes people take control of, and responsibility, for their own safety. It comprises incident reporting forms and allows safety observations to be assigned;
• facility-based safety committee meetings;
• attends onshore meetings;
• while there is “no lack of willingness to consult, it could be a lot better”;
• foreign parent corporate disinclined to consult, but can be “dressed up as behavioural safety”;
• “things [OSH] have changed for the better, but it takes a long time”;
• consultation works well with people who are “really vocal”, but there can be problems if their views are relied on;
• relies on individuals offshore to sort out problems – it would be “counter-productive” to ask offshore workers about OSH when they are offshore as they are on leave;
• the company has not used Step Change as well as it should have.

13. Offshore – behavioural safety specialist
• 1,500 employees;
• OSH is dealt with through representatives and a SHEA committee under the offshore Regulations;
• consultation works well at the day-to-day level, but not for more strategic issues, particularly safety cases;
• MD does not have the time to address OSH fully;
• a “percentage” of the workers wish to be involved and consulted on OSH issues

14. Construction – SHE manager
• responsible for brownfield sites;
• up to 2,000 employees;
• trade unions are present;
• one problem is to keep safety reps as different people will be on site at different stages of a project;
• employee survey carried out every three or four years, with a “lowish” response rate;
• there is no desire among management to consult the workforce, “even though they say they do”;
• consultation is a great idea but there is neither the time nor the energy to do it;
• employees not necessarily interested in consultation – many give you a “blank look” and only 3% know who the MD is;
• workers are consulted on point of use issues but not more strategic approaches;
• office workers have “more to say” on consultation and involvement.

15. Oil and gas – EHS manager
• 6,000 employees;
• non-unionised;
• monthly EHS meetings;
• safety reps are volunteers and attend a three-day course;
• there is a problem in making safety reps “do their jobs”;
• created a risk assessment team that involves employees;
• EHS survey is carried out annually, with a 90% completion rate (anonymous completion is allowed);
• workers are involved in risk assessments;
• CEO is actively involved in EHS committee meetings and “leads by example;
• one issue is whether or not people know where to access information on worker consultation and engagement.

16. Engineering – HSE manager
• steelwork for offshore installations;
• 60 staff (10 office and 50 welders);
• non-unionised;
• consultation achieved through monthly meeting with safety representatives, monthly safety meeting with staff and face-to-face meetings, all of which are “quite informal”;
• will use paper and email to elicit views;
• CEO and chair are both involved in OSH.

17. Housing Association – office services manager
• 100 employees, office-based;
• there are some Unison members (less than 25%, although once it was over 50%) and the union is recognised;
• non-union members can, in practice, be “excluded” from OSH consultation;
• it is difficult to enthuse office workers to become involved in OSH generally;
• lone workers were involved in developing the long working arrangements;
• most policies come out of HR;
• workers are in general not involved in OSH.

18. Catering – HSEQ officer
• offshore catering and support services division of very large group;
• 450 employees on and offshore;
• there are offshore union reps, but no safety reps;
• there is little union membership onshore;
• the focal point of OSH activity is the “safety champions”, who drive safety upwards. Currently there are four champions at two gasp plants;
• he carries out visits with face-to-face contact, encouraging workers to become involved in larger groups;
• to go offshore, workers will have a significant amount of training and specified tasks. The problem onshore is that there is less training and more tasks;
• currently setting up email accounts to facilitate communication and a network between workers, as well as a worker involvement page on the intranet that will deal with concerns from other sites;
• ownership of risk comes out of proper consultation.
STIRLING

19. Manufacturer – health and safety officer

- manufacturer of parts for steel plants. Company has two plants;
- reduced workforce by one third over summer 2009; now back to full complement of 150 on the relevant site;
- regular OSH meetings;
- union reps represent all workers, regardless of membership;
- she is “not seen as management” by the workforce, which assists communication;
- formerly a “blame culture”, with workers hiding near misses;
- believes the shop floor wants to be well informed and able to speak to a safety rep;
- new managing director is conducting a “big push”;
- believes that consulting workers can help give them a sense of ownership of OSH but was unable to provide specific example of how consultation had improved a situation;
- unable to provide specific example of how consultation had improved a situation.

20. Leisure – assistant manager

- 10 employees and 2–3 casuals;
- around 10 years ago, the centre’s services were offered commercially to increase income;
- there are no unions, although some pay scales reflect union agreements due to a hangover from local authority agreements;
- there are very few accidents;
- the small number of staff means they all work closely together, although one “malcontent” is using OSH as an “area for rebellion” (this has also had the effect of bringing the rest of the team closer together);
- the “beauty of a small team” means they can address many issues over a cup of coffee each morning;
- participation in Healthy Working Lives has resulted in a staff questionnaire, and a site survey is underway;
- confident he obtains the views of staff;
- the business director “does not give much of a lead” on involving workers in OSH;
- staff have a desire for an input on issues that affect their daily working lives, but not on more strategic issues;
- unable to provide specific example of how consultation had improved a situation.
21. Construction – health and safety trainee

- workers are consulted over reviews of method statements, instead of being handed out by site engineer;
- ensures engineers speak to site foreman and workers, which was not happening previously;
- workers are given OSH templates, guidance and training sessions;
- on-site visits revealed workers’ concerns and problems – training is due to start in January 2010;
- the views of staff are treated as confidential;
- there is a main board director for OSH;
- some workers just want to get on with their job and not be asked their views.

22. Housing – health and safety officer

- 250 staff;
- non-unionised;
- joint consultative group – all members have training, with several operational groups (including for OSH, wellbeing and many others). The group is chaired by the director and comprises senior managers and reps;
- members serve on the committee for three years and there is “widespread participation”;
- frequency of meetings is variable – that on OSH is “whenever” but generally every 6–8 weeks;
- disagreed with the view of others round the table that the threat of being sued was a problem;
- staff very interested in being involved in everything, including OSH;
- currently involving staff in reviewing OSH policy;
- workers must believe you are going to do something. It is important that you are seen by the workforce to understand their issues and to try to do something about it, but not necessarily to succeed;
- convincing managers to address OSH is a great problem.

23. Chartered surveyors – health and safety manager

- 260 employees on 30 sites;
- OSH recognised as a requirement three years ago;
- 33 partners and run by a management committee
• no OSH forum;
• has been “getting out there” with OSH for a year now, and has OSH “champions” in each office (none of whom have any training);
• although he has the desire to address OSH, management and staff do not have the interest and are profit-oriented;
• part of the lack of interest also arises from the low risk nature of the work, apart from roofs and on-site, which makes it “difficult to sell OSH”;
• there is a lot of “lone working”, and driving, so “arrangements have to be pretty informal”;
• perception that “lunatics have taken over the OSH asylum”.

24. Roofing contractor – health and safety/technical director
• 120 employees and three offices;
• monthly OSH forums with worker representatives;
• monthly meetings, the main thrust of which is OSH;
• monitoring on site and independent monitoring;
• workers come up with their own representatives;
• workers “feel out of place” on the forum because of the presence of so many managers, so he is looking at a possible move to two forums;
• possibility of being sued by workers is a barrier to full information sharing and consultation;
• a high number of CIS operatives don’t see the necessity of consultation and have no loyalty to employers;
• different rules on different sites;
• have comprehensive safety management systems, everyone is vetted and there are site and company briefings;
• two accidents led to a review of OSH standards.

25. Leisure – health and safety manager

250 employees;
• union background but now only 4% in Unison;
• OSH forum with six representatives. The union had requested a safety committee, but this had not worked;
• there are two working groups on the forum, which has been running for six months and has been running well;
• the reps are volunteers, all of who take the IOSH managing safety course;
• the board has worker reps;
• although there is leadership involvement and the general manager visits sites, he would question whether it is genuine;
• the main benefit is that all the procedures are the result of genuine consultation and are therefore workable, with an engaged workforce;
• although the reps are involved primarily in OSH issues, they do touch on other procedures.

26. Retail and distribution – group health and safety manager
• 2,300 staff in three divisions;
• non-unionised;
• two committees – policy, chaired by managing director, and operations;
• shifts mean two meetings a day;
• wants three or four reps;
• effect of credit crunch is strong;
• 100% support from highest levels – he has chaired committees and seen benefits;
• change in approach to OSH from previous MD;
• clear benefits in hazards analysis criteria;
• workers currently involved in reviewing complete documentation.

27. Roofing contractor – training and HR director
• 100-120 full-time staff in three depots;
• 50 sub-contractors;
• non-unionised;
• advice from National Federation of Roofing Contractors;
• formal OSH forum, with representatives from each department and three depots;
• not convinced the committee is effective because it covers the same issues every meeting;
• forum is too top down;
• he now writes up incidents as case studies and takes them to the staff – currently “using an incident that could have been a disaster”;

• trying to get managers to talk to staff before going onto a roof;

• trying to change workers’ behaviour through changing attitudes.

28. Manufacturer – health and safety manager

• 300 workers at factory

• suddenly i/c multi-sites;

• uses volunteer safety reps from each team;

• four committees on site;

• the site is a 24/7 operation, and there is a safety rep for each shift;

• in-house course for the reps (half to one day) – what he expects of them;

• he is a certified trainer;

• everyone feels free to raise OSH issues and managers have targets to raise OSH issues;

• whenever there is an incident, a flash is sent to every PC;

• OSH competitions, prizes range from box of chocolates to days out (can be collective prizes). In 2008, this resulted in 300 issues being raised;

• committee drove safety guarding improvements at cost of £1/4 m;

• changed chief executive at the start of 2008 and moved from “hands off” to a CE who wanted a one-page report every month. This approach is now driven down through directors.

29. Leisure – health and safety adviser

• 1,000 staff, dispersed;

• corporate health and safety forum has elected reps from each department;

• there are also two smaller forums;

• OSH seen as a negative role;

• reps attend three-day IOSH course, but the delivery and support skills were not good. The course, they felt, should be more like the union reps’ course;

• currently sorting out reps’ OSH training;
• complaints are raised by safety reps and dealt with, although it is not always made clear what is done;
• main problem is that workers don’t raise complaints, although this is partly because they are not “brought into OSH in the first place”;
• need help with how to engage workers;
• the CE has changed and has more interest than previous incumbent.

30. Manufacturer – HR manager
• 160 employees, non-unionised, one site;
• foreign owned;
• T-shirts and baseball caps as prizes;
• annual committee meeting;
• each area has a supervisor responsible for OSH and an OSH rep, although in one instance it is the same person;
• agreed with comments above about paucity of IOSH course;
• employee involvement is more aimed at getting solutions to a specific problem, for example work at height policy, rather than more strategically.
• recently-appointed MD has brought a “very significant shift” in OSH approach with a move towards the DuPont model.

31. Housing association – manager
• corporate services includes OSH;
• 5,000 houses including sheltered accommodation;
• 240 employees, non-unionised;
• two relevant groups for consultation – n employee group, run by HR, with reps from each department selected by staff, with management having no say in selection;
• OSH committee, but line managers often do not allow reps from attending. He is now “educating” line managers about their responsibilities. Some “don’t like it at all”, but others have enforced it well;
• new directors have brought an improved attitude;
• £20 a month for being a rep.

32. Real estate – service manager
• office systems;
• four branches, non-unionised;
• change of OSH manager has allowed alignment of each branch;
• monthly meeting;
• “patronisation” can be a problem;
• use OSH consultant for half or one day at a time.

33. Retail – centre administrator
• 11 direct employees with 1,000 indirect covering all services including cleaning, security;
• non-unionised;
• OSH committee with staff and contractors. This rotates to ensure everyone is involved;
• corporate strategy with OSH policy from the centre;
• holds OSH courses;
• information sharing and training for contractors;
• no training in how to be an OSH rep.

34. Manufacturer – ergonomist
• 1,200 staff, non-unionised;
• there are five in the EHS team;
• morning meetings, daily walkarounds, weekly meetings, monthly meetings;
• staff elect reps to “People Together” committee (can include OSH);
• OSH included in leadership meetings;
• “safety timeouts” each quarter, with work stopping for one hour;
• different approaches for different shifts, with emphasis on maintaining consistency across shifts.

35. Manufacturer – health manager
• foreign site with different culture to UK;
• safety dealt with through a central committee
• site has a “flat” structure, which allows rapid communication with workers;
• site uses “champions” for all types of issues – they are drawn from all levels of the workforce;
• being a champion is popular because it often proves a tool for promotion.

36. Local authority – OSH manager
• 8,000 employees;
• recognises unions;
• works in construction;
• most services will have works committee meeting or joint consultative groups or specialist meetings, for example on HAV. The meetings have different frequencies;
• the committees rotate the chair, and OSH is part of the agenda of all meetings, which allows an “audit trail”;
• open door approach, suggestion boxes;
• a major problem arises when OSH is raised “but nothing happens”;
• inadequate numeracy and literature skills are a barrier to meaningful consultation – the council uses coaches and mentors to get around this;
• trying to get buy-in from senior managers and heads of services. There are also many tiers of management, which makes it difficult.

37. Construction – health and safety advisor
• 80 FTE staff and subcontractors;
• non-unionised;
• there were fewer problems when the company was smaller;
• uses toolbox talks, open door policy, news letter, notice boards, pre-start meetings;
• the main barrier is the people on site;
• there is good communication between managers and supervisors, but the problem is “bottom up”;
• consultation is focused at the “sharp end”.
EDINBURGH

38. Manufacturer – health and safety officer

- 200 employees, non-unionised;
- OSH is first item of monthly team meetings;
- structure of team meetings depends on size of department;
- staff at meetings are “not representatives”;
- there has been a huge change in OSH culture in recent years;
- the claims culture can be a problem for consultation.

39. Local authority – health and safety adviser

- 5,000 employees, mixture of union and non-union;
- Unison is the biggest union, representing care workers (not social workers);
- high level consultative forum, which involves union reps;
- agreement that unionised reps will represent non-unionised staff, but not sure this happens in practice;
- there are also more localised committees, for example a home care OSH committee;
- those with union backgrounds are able to see the bigger picture;
- there are cultural and regional differences;
- managers are overworked and do not have time for consultation;
- time is crucial and so OSH should tap into existing structures outside of OSH wherever possible;
- in process of changing manual handling training, moving away from bringing staff in to training in situ (although he did not tie this explicitly to worker involvement).

40. Construction – senior safety adviser

- mixture of unionised and non-unionised workers;
- daily meeting on that day’s work on OSH and method statement (based on DuPont model);
- non-unionised reps are elected;
- emphasis on training lower levels of site supervisors.
41. Media – divisional OSH adviser

- 8,000 employees overall, with 800 in the print division.
- Some divisions recognise unions; some don’t, although unions are not strong;
- committee meetings;
- introduction of toolbox meetings was a big step;
- line managers actively involved;
- feedback is provided on employee concerns;
- MD involved.

42. Retail trade association – manager

- butchers’ trade association;
- staff of 6 FTE (10 workers);
- no unions;
- staff meet each Friday, with OSH always on the agenda;
- because the majority of staff are trainers, they are aware of the desirability of worker involvement and have some knowledge of OSH;
- produces a newsletter;
- OSH is often at the bottom of a manager’s job description, and that is where it stays.

43. Charity – manager

- 200 staff on 12 sites;
- elected staff forum, which covers OSH among other issues;
- health and safety is devolved to each unit manager;
- director’s support is of “huge” importance (consensus around table).

44. University – health and safety manager

- 1,200 staff, 1000s of undergraduates;
- emphasises the need to “get in as early as possible”;
• range of consultation mechanisms;
• the experience of visiting staff can be valuable for highlighting different ways of doing things;
• “the most bellicose staff are potentially the most useful but are often the most reluctant to step forward as a representative”;
• provided example of how new staff brought a fresh pair of eyes to a problem that resulted in the substitution of a harmful substance.

45. Pharmaceuticals – EHS adviser
• 600-700 staff across two sites;
• non-unionised;
• safety reps trained for each department;
• staff intranet;
• monthly safety meetings;
• reps are volunteers and there are no problems getting people to come forward;
• staff can easily speak to line managers;
• staff can see that things get done when they raise an issue;
• everybody is too busy for consultation;
• positive example involved substituting individual desk bins with central recycling point, which also saved money (nb environmental, not OSH, benefits);
• largest barriers are workload and lack of time.

46. Equipment testing – HSE administrator
• 245 employees;
• no unions;
• In post just three months – she is part of a compliance department;
• monthly meeting of safety committee, comprising LC and her boss, supervisor, OSH adviser and safety reps from each dept (up to 10);
• observation and improvement cards (which can be anonymous);
• culture whereby workers will come and talk to raise issues or on her walkabouts;
• supervisors are “so good” that they obtain view from staff;

• “old offshore guys” are a problem, but getting round this by using Fpal (a high score on which is required by many clients), which shows value of OSH;

• confident she is eliciting views of all staff;

• feedback on changes made as a result of a suggestion or consultation response is vital – if the suggestions are ignored, the workers won’t bother with another;

• need for help with reinforcing the business case of OSH and worker safety.

47. Services – manager

• 160 employees, all non-unionised;

• there is another person i/c OSH;

• monthly meeting of branches, which is also attended by departmental managers;

• fear of being sued can be a barrier to sharing of information;

• consultation is at the point-of-job level, rising to cover slightly more strategic issues;

• not confident he is obtaining the views of all staff;

• the major problem is passing information from senior management to workers;

• there is a need to explain why there is a need to consult.

48. Leisure – HSE advisor

• around 100 staff;

• there is a safety committee but it has met once in the past two years;

• each of the seven departments has a rep on the committee;

• the reps are all volunteers, although “they are not always the ones you are looking for” (some volunteer only because they think they will get some time off work);

• there is no communication;

• the major problem is that the director has no interest in OSH, despite training;

• the primary means of OSH communication with staff is that they come and talk to her;

• she is not confident that she is getting the views of the staff;
• what consultation there is limited to immediate requirements of the job;
• she believes there is a need to make senior managers and the director take OSH seriously;
• single biggest need is making the business case on OSH generally, and worker engagement specifically, to senior managers and director.

49. University – head of health and safety

• 1,700 staff as well as students;
• main OSH committee includes union safety reps, non-union reps, faculty reps, senior managers, departmental coordinators etc;
• all 52 coordinators have been through an OSH course;
• open door policy;
• web site;
• her “big hit” was to bring a lawyer in to a training seminar for all senior managers to explain the consequences of failure. Similarly each head has to sign off an annual safety report;
• attitudes of some senior managers can be a “block” to reaching staff;
• consultation at all levels from immediate job needs to more strategic issues;
• generally, she will float draft documents and ideas around staff before working them up for presentation to senior managers;
• “Healthy Working Lives” has proved particularly beneficial in securing participation.
GLASGOW

50. Construction – health and safety officer

- 400 employees in region;
- huge base of subcontractors they need to engage;
- informal communication on day-to-day basis;
- contractors approach staff too;
- formal processes such as toolbox talks and induction as well as open-door policy. This works “to a mixed level;
- run a lot of in-house training – participants normally open-up once they get away from job;
- use the European safety weeks – workers develop own initiatives;
- current focus of involvement is at coalface;
- two years ago, company introduced a glove policy following consultation, which has cut injuries. The workers were involved in the selection of gloves;
- contractors are consulted on a site basis and are involved in toolbox talks – currently talking about advance guard rails for mobile tower scaffolds;
- OSH is satisfactory at a management level;
- the important things are trust, fairness and respect – need to get “buy-in to these”;
- people switch off from claims such as “zero accidents for 324 days”;
- very important to tell staff “here’s what I did with your suggestion” – both in terms of results and talking it seriously;
- have “key members”, not representatives.

51. Shipping – health and safety coordinator

- 12 employees – office-based;
- monthly OSH forum and six-monthly assessments;
- management chose the three OSH reps;
- limited training.

52. Charity – board of management member

- here to find out about health and safety;
• no consultation or central guidance on OSH.

53. House building – operations manager
• standard setting and warranty provider for new homes;
• 1,000 employees, dispersed (60% work from home);
• non-unionised;
• staff association;
• general reps, appointed for two years;
• no specialist OSH training;
• quarterly OSH meeting, mainly of senior managers;
• confident he is getting the views of many staff.

54. Building projects management – group health and safety manager
• 4,500 staff (27,000 worldwide);
• non-unionised;
• staff council, with member from each of the 27 offices;
• OSH structure set by group board;
• short presentations and briefings on OSH;
• don’t use suggestion boxes;
• have sent 60 staff on basic IOSH course;
• confident getting the majority of staff views;
• message can get lost at any level.

55. Shipping – quality manager
• 150 staff and 1,500 seafarers;
• reps on board ships;
• training is weak;
• policies developed centrally and handed to ships;
• use videos;
• financial constraints are important.

56. Laboratories – health, safety and environment officer

• 14 labs, 1,200 staff;
• non-unionised;
• elected staff reps;
• have OSH meetings;
• reps complete basic CIEH course on OSH and risk assessment;
• use “brainwave scheme”, with £100 awards;
• OSH newsletter;
• eliciting views of 90% of staff;
• some employees are informal leaders who we seek out (not necessarily for the committee);
• there are a lot of lessons from sharing information across the sites;
• OSH team “makes a real effort to be the face of OSH”.

57. Shipping – quality manager

• 400 employees in UK (1,800 worldwide);
• non-unionised;
• employee opinion survey every year;
• OSH committee – 15 members;
• committee members are asked to seek view of colleagues;
• committee and other OSH issues are cascaded through managers and newsletters;
• e-news flash weekly (includes OSH);
• consultation from practical to strategic issues;
• language and culture can be a barrier (50% of workforce do not speak English as a first language (if at all), which can make communication difficult);
• CEO is excellent;
• although there is not buy-in from all ship officers, it is easy to by-pass them with emails;
• confident the company is getting views of workers.

58. Charity – board of management chair
• receives central guidelines but not on OSH – told to “find out about” OSH;
• monthly board meetings – all volunteers, no training.

59. Electrical company – health and safety advisor
• 20 electricians and four office staff (the directors are also electricians);
• surveyed all electricians with a questionnaire (mainly OSH) – all participated;
• OSH is included in annual appraisals and bi-annual meetings;
• consultation covers a range of subjects;
• while small size can be an advantage, it can also be a barrier to open communication;
• directors are OK on OSH, but supervisor can be a barrier;
• main impetus on OSH comes from contractors wanting to see their paperwork.

60. Engineering consultancy – health and safety consultant
• 7,500 staff;
• although there are no unions within consultancy, they deal with unions for clients;
• runs best practice forum every three months, as well as committees and steering groups;
• annual OSH survey, eliciting a response of well over 75%;
• comprehensive training on OSH, provided externally and internally;
• OSH champions;
• views are sought throughout organisation;
• language and culture can be a barrier;
• strong buy-in to OSH at CEO and senior management level.

61. Services – OHS advisor
• 80 national appointees;
• email is a huge advantage but needs to be focused;
• offer weekly OSH updates and fortnightly meetings;
• view are sought from day-to-day to strategic issues.

62. Facilities services – training manager
• company is part of a global group;
• she is also the OSH champion;
• 310 employees;
• 50% union membership;
• chairs quarterly OSH reps meetings as well as OSH management meetings. The reps’ meeting is bigger and more interesting. If issues are unresolved, she takes them to the monthly meeting;
• suggestions received, walkarounds, OSH tours, surveys;
• each service has OSH rep, who is nominated by colleagues;
• consults through the spectrum of topics;
• approach starts with the top.

63. Food manufacturer – operations manager
• multi-site food manufacturer;
• 59 people on site (280 in total);
• non-unionised;
• OSH is first item on management agenda;
• daily site meetings;
• OSH group meets monthly;
• staff survey;
“innovation zones” (not suggestion boxes) – monthly table meetings, with OSH as the subject twice a year, although the zones have worked better for products;
• focus on a high-risk department each month;
• build hygiene structure from bottom up and is integrating OSH into this;

• company does not consult all the time, but has had success with subjects such as ear defenders;

• individual managers can be a barrier, but elsewhere there is “complete buy-in”.

64. Construction – health and safety officer

• non-unionised;

• 600 staff, but recession has resulted in staff losses of one third;

• annual consultation forum – each group nominates a representative. The forum has guest speakers;

• senior management meetings, quarterly meetings, toolbox talks;

• Healthy Working Lives has proved a fantastic way of getting people involved;

• consultation has produced results, eg boot trials and policy;

• there is leadership on OSH, but there is also an “older” culture at middle and supervisor level.

65. University – researcher

• has seen good examples of consultation at operational and board level, for example on trials to select equipment;

• at board level, representation is the way to go;

• it is hard to keep people motivated in construction;

• long-term workers are paid off, which can prove problematic;

• not a fan of suggestion boxes;

• academic research shows it is not a good idea to incentivise OSH, but all the evidence in the real world shows that if there is a bonus for doing A and not B, then A will get done. There has to be a place for incentives.

66. Manufacturer – OSH manager

• timber importers;

• 85 staff on site, with 400 in group;

• needed to persuade the more experienced workers of OSH;

• non-unionised;

• sought views of staff through questionnaires on OSH and all issues;
• introduced formal system of suggestion boxes, OSH panel and OSH reps;
• he rose from the shopfloor, which aids approachability and understanding;
• he has an emphasis on being visible and approachable;
• seven reps on site and likes reps with strong characters;
• MD attends some OSH meetings to show support.

67. Construction – SHE advisor
• 150 staff in Scotland (many more elsewhere);
• non-unionised;
• intranet, which contains SHE policies, is used extensively;
• many different meetings will consider SHE in addition to the SHE meeting (eg designers, contractors);
• getting buy-in to short-term jobs can be an issue;
• training matrix for staff;
• look for OSH in supply chain.

68. Shipping – training director
• 25,000 staff, operations are mainly outside UK;
• use reporting of near misses and good behaviours, safety management system for ships, seminars, shore-based intranet;
• on ships, the safety committee is chaired by the captain and is attended by the second in command and safety representatives from the crew;
• officer will have attended an OSH training course, with representatives due to attend in 2010;
• would consult on issues such as PPE but not strategy and policy;
• there is a confidential hotline, which gets used;
• OSH culture is a general problem in the shipping industry.
APPENDIX 9: QUESTIONNAIRE ANALYSIS

RoSPA consultants contacted a list of 240 named individuals to ask them to complete a telephone questionnaire survey on worker involvement. The questionnaire is attached at appendix X. The list comprised RoSPA award winners, members, congress delegates and key contacts in Scotland. The availability of the questionnaire was also raised through Scottish Healthy Working Lives (SCHWL). RoSPA made three attempts to contact potential participants before excluding them from the survey. The telephone survey resulted in 73 completed questionnaires (one of which was completed electronically by the participant). Of these, 40 also expressed an interest in attending event; although they were sent individual invitations, only a handful attended.

In addition to the 73 telephone interviews, a further 25 workshop attendees either completed a questionnaire at the workshop or returned a questionnaire subsequently.

This analysis is based on the 81 questionnaires that were received by the cut-off date. No participant answered every question, which is why the figures in the analysis below do not total 81.

As a group, respondents to the questionnaire stage appeared to be far more advanced in worker involvement than the workshop group. There are three potential explanations to this:

• the telephone survey involved had far more employers that recognised trade unions and were therefore more likely to be more advanced in worker involvement issues;

• when pressed at the workshop, some participants were not as far down the engagement route as a simple tick of a “yes” box on a questionnaire might indicate; and

• it may have been that the workshop attracted less advanced organisations precisely because they wanted to learn more about worker involvement.

Respondent profile

Respondents came from three main sectors: oil and gas production and exploration (17); construction (16); and manufacturing (11). The other sectors represented were: education (5); services (5); housing (3); government and public sector (3); chemicals (3); retail/wholesale/distribution (3); safety consultants (3); logistics and transport (2); electrical (2); financial and insurance (2); and one each from leisure, pharmaceutical, voluntary, mechanical engineering, health care, electrical contracting and electronics.

The respondents had been established for considerable periods of time: 19 had been in business for 100 or more years, six for 50 or more years; four for 40 or more years, 12 for 30 or more years; nine for 20 or more years; 15 for 10 or more years; and just seven for fewer than 10 years (with the newest being three years old). This would imply that the survey has failed to capture new businesses, which will probably be the result of the lists that were used to elicit the responses.

Most respondents were multisite (54), with just 14 operating on a single site.

Around two thirds of respondents (34) were part of a group or parent company, with 16 stating they were not.

Around half (38) employed 250 or more workers, while only 11 employed fewer than 50 workers:
• fewer than five employees (1);
• 5–24 employees (five);
• 25–49 employees (five);
• 50–99 employees (six);
• 100–249 employees (17);
• 250–999 employees (24); and
• 1,000 or more employees (14).

Two-thirds (43) had temporary employees and 23 did not.

A majority of respondents (55) used contractors, with only 20 not using any at all. Of the 55, nine used 1–4 contractors; 32 used five or more; four said the number varied; and 10 were unsure how many contractors they used.

All but four of the respondents had turnovers of at least £10 million. Only one respondent had a turnover of under £1 million, and only three had turnovers of at least one million but below £10 million. Thirteen had turnovers of more than £10 million and below £100 million, and a further 11 had turnovers of £100 million or more.

Further:

• 49 respondents belonged to a trade association or equivalent; 23 did not.
• 13 said they had received an enforcement notice in the previous three years; 62 had not.

**Union recognition**

Of the respondents, 36 recognised trade unions and 30 did not (although 14 had some employees in unions). Nine of the 36 had half or more of their workforce in union membership. Very few gave reasons for non-recognition: comments included “family business, felt unions not necessary” and “we operate a set grievance policy and have safety and staff representatives”.

Three respondents claimed that despite recognising unions, there was little or no unionisation – the unions, said one, were “not eager to participate”.

The unions named were: Unite (and the T&G), Unison, UCATT, GMB, USDAW, EIS, PCS, Prospect, FDA and the Police Federation.

Where employers had unionised and non-unionised workers, only two dealt with health and safety solely through the union, only one dealt solely with non-unionised representatives, and six dealt with unionised and non-unionised workers separately. The vast majority appeared to deal with the workforce as a single entity, either through a representative forum or directly with individual employees.

**Responsibility for health and safety**
The vast majority of respondents (60) had a named board member responsible for championing health and safety issues. Of these, four named the MD, one a technical director and one the senior commander. Only four respondents said they did not have a board member.

Of the 59 organisations that answered the question: 45 said they employed an an-house health and safety adviser; 10 said they used external consultants; and four said they used both.

**What is worker involvement?**

We asked respondents what they understood by “worker involvement in health and safety”. A selection of the responses is set out in the box. The responses covered many different aspects and can often be placed in several categories. The most popular appeared to cover:

* getting workers to take responsibility for working safely;
* representative structures (safety representatives and/or committees); and
* communication – usually two-way.

A significant minority mentioned:

* involving workers in risk assessments, but usually in relation to their specific jobs;
* empowering workers to raise issues and point out when things are wrong; and
* involvement in the management of health and safety.

A smaller number talked about:

* ownership of controls;
* agreeing solutions and involvement in decision making; and
* involvement in designing work processes.

Other, albeit infrequent, mentions cover:

* behavioural safety (with 28 actually operating behavioural safety programmes, this could indicate that most do not consider such programmes as constituting worker involvement);
* involvement in investigations and inspections;
* training (although this is mentioned surprisingly infrequently, it is likely to be because it is not thought of as worker involvement, rather than that it is not occurring – in the workshops, there was clearly a fair amount of health and safety training in one form or another).

**The law**

When asked about their understanding of the legal obligations to consult with employees on health and safety matter, nearly all the respondents gave an answer along the lines of “It is a legal obligation.” A small number mentioned that the
requirements differed according to which Regulations covered their workplace. The most sophisticated answer was, probably: “Limited in non-union environment, special requirements in major hazard sites/risks.”

An overwhelming majority (62) of respondents believe the current legislation helps effective worker involvement in their business; nine believed it was a hindrance; six believed it was neither; and six believed it was both. Several also pointed out that the law was no more than a baseline that they would comply with in any case: “Doesn’t make a difference as we would naturally work in a way that would comply” and “It sets a framework but you cannot legislate for the engagement of workers; that is something far more behavioural.”

The typical reasons for why the law assists worker involvement included:

- “Because it focuses on other aspects of business.
- Gives a better understanding of why we do things.
- Workers at the ‘coal face’ often see things that may not be obvious to management.
- Legislation underpins our company values, information, training supervision, risk assessment and accident investigation.
- A necessity to ensure greater compliance across the UK.
- It makes us talk to them and get them to talk back to us.
- It forces management to consult therefore standards are raised.
- If there is no consultation you do not know of any underlying issues.
- Having a legal requirement to consult helps to ensure cooperation from senior manager to consult.”

Within these comments, a small number of respondents cautioned there needs to be greater publicity and enforcement of the requirements,

The reasons for why the legislation was a hindrance included:

- “It is beginning to hinder worker involvement due to the fact that staff (some) believe that the ‘lunatics have taken over the asylum’ – crazy application of legislation creates apathy.
- Don’t like it; it is a battle with an ageing workforce.
- Hinders because some staff feel that they could be held responsible.”

**Systems and structures**

- Of the respondents, 42 said they had representatives of employee health and safety (RESs), and 11 said they did not. (It should be noted that this is 23 more than the total number of employers that said they did not recognise unions! This discrepancy is likely to be caused by a number of respondents not answering the question on recognition, confusion among respondents about the distinction between RESs and union-appointed safety representatives, and the fact that a number of unionised employers appeared to have answered this question.) The response as to what constituted a representative ranged from union-appointed safety representatives and RESs, to “champions” through to “not specific – anyone can do it”.
• 41 respondents said they had non-unionised health and safety committees and six said they did not; a similar proviso applies as above in terms of the numbers. What stands out here, however, is that comparatively few examples of committees were supplied and, when they were mentioned, they encompassed not just a joint forum with employee representatives, but also toolbox talks, daily ream “huddles”, board meetings, management meetings, training and awareness seminars.

• Only 12 respondents had consultative councils, whereas 41 did not. The examples supplied indicate that there was some difficulty among respondents as to what constituted a consultative council: while there was a single mention for each of a European Works Council, Whitley Council meetings and a community council, more respondents cited safety committees and meetings.

• 47 respondents used employee opinion surveys and questionnaires; nine said they did not. There is a wide range, including: ad hoc; individual issues such as violence and aggression; questions in a welcome back; regular surveys ranging from annually to every three years; occupational health surveillance questionnaires; help with risk assessments; surveys for employee engagement and morale. One respondent cautioned that it was using “too many perhaps”.

• 19 respondents used quality circles, whereas 34 did not. Of the 19, however, four were explicit that they were not used for health and safety purposes and it was not clear how many were so use.

• Respondents were asked whether they used “weekly meetings”. The intention behind the question was to investigate worker involvement in health and safety at the “sharp end”. Some of the answers – quite rightly – strayed beyond the somewhat arbitrary choice of a week to encompass daily, monthly and bi-monthly meetings. Thus, while 23 said they held weekly meetings and 13 said they did not, it is quite likely that some of the latter held other frequencies of meetings. The meetings included: daily morning briefs; operations meetings; daily on-site meetings; monthly planning meetings; supervisory-line management meetings; toolbox talks; monthly safety meetings between foremen, shop managers and the HSE manager; monthly meeting bringing together first aiders, fire marshals and safety representatives; weekly safety meetings open to all; weekly updates for union representatives and monthly meetings for non-union representatives.

• Suggestion schemes were used by 43 respondents, with 16 stating they did not use them. The interpretation of a suggestion scheme strayed beyond the commonly accepted use of the term to encompass observation cards, an open-door policy, continuous improvement, engagement surveys and systems such as STOP. There were no expanded examples of a suggestion scheme working for health and safety.

• 44 respondents said they had a confidential reporting line; 10 did not. There were a small number of comments to the effect that the line was in effect an open door or an unofficial policy. There were few details as to the schemes themselves, although one mentioned a “staff forum held weekly in confidence” and another a “Protector line”.

• 28 had behavioural safety programmes; 19 did not; three were developing them; four were thinking about them; and one had trialled a programme but was not operating one. Again the details are insufficient to say anything further. Of those that replied yes, where they gave details, it was not clear that they were always formal programmes, as opposed to “Campaigns in place to encourage responsibility for self and others.”
• 32 allowed “whistleblowing to senior management”; 11 did not; 11 others operated an informal open door policy; and three were unsure. One mentioned lines were open to the chief executive; another remarked that it “happens mostly with unionised staff”.

• 37 operated an anonymised reporting system; 22 did not; two were unsure, and one was going to introduce one. Of the systems, one said observation cards could be raised anonymously, one had an electronic system and one said that the company nevertheless encourages the reporting “to be open”. Again, some of the systems were informal or unofficial.

• 56 respondents said that they operated no other systems. Of the 18 respondents that did operate other systems, some could probably have grouped them under the above lists given the “wide interpretations” of some of the other respondents. Among the other approaches were:
  – any staff member can stop a job or report an issue to a safety representative or manager/foreman at any time;
  – informal group discussions;
  – school campaigns;
  – direct contact via tours, talking with employees;
  – Q&A sessions;
  – the ‘integration plan’, which groups various company tools;
  – incentive schemes; and
  – 90-day plan in place on a rolling basis in which the workforce are involved.

**Communication**

Respondents were asked which of 11 types of communication they used. The table below shows that notice boards and face-to-face contact were, with one exception, universally used. Even at the lower end, however, it is still the case that most respondents are using the means (particularly given that permit-to-work systems will not be relevant in all workplaces in any case).

<table>
<thead>
<tr>
<th>Type of communication</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notice boards?</td>
<td>73</td>
<td>1</td>
</tr>
<tr>
<td>Face-to-face contact?</td>
<td>72</td>
<td>0</td>
</tr>
<tr>
<td>Data sheets/written instructions</td>
<td>69</td>
<td>7</td>
</tr>
<tr>
<td>Direct mail/Email</td>
<td>67</td>
<td>6</td>
</tr>
<tr>
<td>Point-of-work risk assessments</td>
<td>67</td>
<td>8</td>
</tr>
</tbody>
</table>
We asked whether respondents consulted workers on 14 specific health and safety matters. The table below shows that task-specific and general risk assessments were the most common subject, but that even the lowest scoring issue – the selection of competent persons and safety services – was still consulted on by two in three respondents. The subjects eliciting the most frequently mentioned consultation tend to be those most closely related to the actual doing of the job, whereas those towards the bottom – monitoring and strategic priorities, for example, will have less immediate, specific and obvious relevance to an individual worker.

One respondent cautioned that although it could answer yes to all the questions, it would sometimes apply to only a subset of the employees. Another stated that while it consulted on all of these “great approaches to engaging people … the management skills required to engage people are still lacking”.

Other subjects that respondents consult on included: recycling procedures/strategy, driving, behavioural improvement schemes, fire procedures, traffic management plans, the COSHH Regulations, emergency plans, health surveillance of all staff, “just anything that arises”, occupational hygiene and ISO environmental systems.

### Consultation topics

<table>
<thead>
<tr>
<th>Communication subject</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Task or subject-specific risk assessments</td>
<td>67</td>
<td>4</td>
</tr>
<tr>
<td>Generic risk assessments</td>
<td>66</td>
<td>4</td>
</tr>
<tr>
<td>Health and safety implications of future plans (introduction of new procedures, work processes, equipment or product etc)</td>
<td>65</td>
<td>5</td>
</tr>
<tr>
<td>Specific policies/standards/procedures</td>
<td>63</td>
<td>8</td>
</tr>
<tr>
<td>Selection of control measures and/or safety equipment</td>
<td>63</td>
<td>9</td>
</tr>
<tr>
<td>Incident investigation procedures</td>
<td>63</td>
<td>9</td>
</tr>
<tr>
<td>Development of health and safety management systems</td>
<td>60</td>
<td>14</td>
</tr>
<tr>
<td>Complaints investigations procedures</td>
<td>58</td>
<td>11</td>
</tr>
<tr>
<td>First-aid procedures</td>
<td>58</td>
<td>11</td>
</tr>
<tr>
<td>Monitoring procedures</td>
<td>57</td>
<td>13</td>
</tr>
<tr>
<td>Occupational health and wellbeing</td>
<td>54</td>
<td>17</td>
</tr>
<tr>
<td>Periodic revision of organisation’s health and safety policy statement</td>
<td>53</td>
<td>18</td>
</tr>
<tr>
<td>Setting strategic priorities and improvement targets</td>
<td>52</td>
<td>20</td>
</tr>
<tr>
<td>Selection of competent persons and other health and safety services</td>
<td>45</td>
<td>26</td>
</tr>
<tr>
<td>Other</td>
<td>13</td>
<td>61</td>
</tr>
</tbody>
</table>
Training

Of the respondents, 61 offered their representatives training, while 11 did not (some of whom said it was not needed or relevant).

• The courses tended to be a mixture of recognised and in-house courses: the most commonly cited was IOSH, and in particular Managing Safely, but there were also mentions of the NEBOSH certificate, REHIS, SVQs and NVQs, union and college courses for safety representatives, RoSPA. Others mentioned training related to behavioural safety, management/supervisors, workstation/computer/office. Only one mentioned “soft skills training”.

• 16 specifically mentioned they provided training facilities – mainly a room, but also fax, telephone and internet access.

• Most of the respondents (56) said they allowed paid time off for employee representatives to undergo health and safety training; only four did not.

Benchmarking

In terms of benchmarking, 31 said they did and 16 did not. It is probable, however, that most respondents answered this question in relation to benchmarking generally rather than worker involvement in particular. The benchmarking was varied – with four citing against other facilities within the company or against other companies within the group; three mentioned other colleges within Glasgow or the university sector; and one each mentioned within a trade association; leisure benchmarking group; within supply chain; through Step Change, against the NHS; with other RAF stations; and First Point Assessment Ltd. One benchmarked for quality but not health and safety and three were either starting the process or wanted to.

Benefits

We asked respondents whether involving their employees in health and safety had realised any benefits, and suggested five examples: reduced injury rates; reduced absence rates; improved productivity; enhanced morale and better workforce relations. Of the respondents, a dozen said they had seen benefits in all five areas, and five that they had seen none. Many other respondents listed one or more of the benefits, as well as some that were unprompted, although 17 cautioned that it was difficult to measure any impact or that they had no hard evidence to support any conclusions.

In addition to the dozen, 16 respondents said that worker involvement had reduced injuries, with several indicating that it had reduced the severity of, or time lost from, injuries; five said that absence rates had decreased. Another respondent highlighted a decrease in drivers’ accident rates.

A number of respondents mentioned less quantifiable improvements that can be loosely grouped under an improved “culture”:

• two specifically stated that workforce improvement had improved the safety culture. A third respondent highlighted the potential of health and safety to unite in an otherwise divided culture, noting that involvement in safety “can often be an area of joint interest when the culture may be that worker/management have conflicting interests”;
• seven reported improved employee relations;
• five said employee morale had improved (although another specifically said there was no evidence of this);
• workers are “more comfortable in speaking about health and safety”;
• four reported an increase in awareness of health and safety, with three specifically highlighting an increase in the number of safety incidents, issues or near misses that were reported;
• involvement had been a “team builder” (one respondent);
• one said that “one large benefit has been the focus given to health and safety matters”; and
• first-aid training had benefits at home (one respondent).

Many of these issues are encapsulated in the view of one respondent who said that involving workers had resulted in “a better understanding of the reasons for health, safety and environment controls. Staff are happier to get involved in safety issues if it is explained why they are necessary this is especially true in safety training.”

Pride and practice

We asked the respondents whether they had examples of good practice of which they were particularly proud. Although 16 respondents said they had no examples of good practice and a further nine did not list anything, 53 offered one or more examples. It should be noted that some of these examples were, in practice and not surprisingly, the same as the benefits.

• Ten cited good practice examples of staff raising issues and intervening to solve problems, including: “observation cards being raised; SHIPS (safety hazard identification programme); reporting of ‘near misses’ is much higher and good completion of actions; we introduced a ‘hazard spotting scheme’ which has proved very successful; the TR observation method piloted by HSE in conjunction with Bar et al; behavioural safety scheme and observation programme; unsafe acts/conditions reporting system; the Lloyd Observation System; and a safety responsibility campaign (intervention) actively encouraged by management.

• Three cited the introduction of different types of meetings: HSE forum held annually for on/off shore staff, which brings forward good ideas; representatives raising issues at meetings; First Tuesday – a monthly briefing linked to an in-house magazine, on a face-to-face basis, in which briefers are provided with a single sheet identifying the key health and safety messages; and a SHE conference annual targeted at operatives and a SHE management conference.

• Four mentioned training initiatives: “one of the best practice examples was when staff requested greater or more formal training in the use of lifting equipment – a suitable training course was provided on site, since then staff have become more aware of the dangers and condition of the equipment, and have begun to police themselves in these controls: and, from a police force, excellent training in dynamic risk assessment (situational awareness linked to specific hazard categories); Zero-harm training – over 700 trained in three weeks; training always fully booked.

• Three cite involvement in risk assessment, monitoring and control decisions.

• Specific initiatives included:
– “a safety zone, information centre for staff is also a ‘time out’ zone where [a worker] can request time out to look at the work activity and talk to supervision to re-assess the activity”;

– creation of HACCP (Hazard Analysis and Critical Control Point) teams;

– Take Care, Mind Safety;

– intranet system well used with good feedback;

– a new “manufacturing process installed and changes made for the better on the recommendations of the workplace”;

– monthly DVD brief;

– standards of machinery guarding and work at height equipment;

– first-aid systems, location of smoking shelters, consultation with staff on access/egress during construction work;

– “Just Care” programme, which is about HSE leadership and ownership;

– “No Accident Behaviour” (NAB) – “recognised by the HSE as good practice”; and

– “far better manual handling, reduced number of incidents”.

Barriers to involvement and consultation

Asked whether there were significant barriers to effective involvement and consultation, 21 said there were not – “not at all”, said one respondent, “it’s all about leadership.” Twice as many respondents (43) did believe there were barriers, however:

• Eight mentioned perceived pressure of work, time and competing priorities (particularly production).

• 16 mentioned the problems of “getting everyone together”. These occasionally encompassed shift patterns but were generally related to geographical barriers – for example, more than one site, the remoteness of some work locations, lone and remote workers, and mobile workers with frequent changes in the workforce. (Some of these barriers, but by no means all, arose because of the work being offshore.)

• Three mentioned communication: about targets; “middle management /supervisors fail to provide adequate communication between workers and management”; and a lack of feedback.

• 10 mentioned attitudes of the workforce – these included a: “‘macho image’ amongst male workers; culture related to nature of work, [with] people set in their ways; employee mind set is negative– ‘done this job for [so many years]’; a reluctance to change; workforce understanding health and safety for themselves; and some people are just not interested in getting involved.”

• Four mentioned problems with managers: commitment from management; “managers and accountants”; a lack of soft skills among managers; and “33 partners and a management committee whose focus is on profitability and see health and safety expenditure as expendable”.

• Two other respondents highlighted barriers regardless of rank: “people’s willingness to participate from bottom to top”; and “nobody wants to get involved including some managers”.

• Three mentioned trade unions as a past or present barrier: “On occasion [the] trade union can be hard-nosed and not participate”; and “Sometimes union can be rather needy.”

• Other single mentions included:
  – excessive paperwork;
  – “blame culture”;
  – occupational health viewed with suspicion;
  – a “downturn in workload”;
  – media perception nationally;
  – people’s willingness to participate from bottom to top;
  – “HSE ‘molly coddling’ and unrealistic limits with subsequent backlash”; and
  – an “occasional clash of personalities”.

One further barrier, which might imply a belief that worker involvement comes later in the process, was, in fact, mentioned as an “innovative idea” (see below): “At the moment I am looking to develop a baseline for safety rather than create some new avenues for the team. Once everyone is more confident in their role for health and safety we can develop the system to suit us better.”

**In search of information**

The most common source of information that respondents had used on involving employees in health and safety was the HSE: 56 stated they had used the HSE, 59 had used online HSE guidance and 44 HSE hardcopy guidance. (It is probable that most of the 56 relate to one or both of the two other categories, rather than asking an inspector or ringing HSE Infoline, although there is no way of this suggestion be conclusive from the questionnaires themselves.) In addition, information had been sought by:

– 20 respondents from a local authority;
– 15 from another enforcing authority such as the fire service or SEPA;
– 20 from trade unions;
– 33 from RoSPA;
– 26 from a consultant;
– three from Step Change; and
– two from Acas; and
– most had used an assortment of other official guidance, magazines and information sources.

It should be cautioned, however, that some of the examples that respondents provided indicated that some had interpreted the question more widely to encompass advice on health and safety issues beyond workforce involvement.

The vast majority of responses on the usefulness of the information were positive; although a handful of respondents were critical of the HSE information, many more were positive.

There were some pointers as to how information could be made more helpful:

– “it needs to be interpreted to an organisation and adapted to its culture”;
– current publications “tend to be theoretical rather than practical”;
– “many are either too much in depth for the average worker to consider or of too little real value because they are too superficial”;
– “clarification [would be] useful”;
– “HSE not helpful, not a direct response, reading off a screen or ‘phone another number’”;
– official guidance is “much more useful now it is free of charge”;
– “some HSE on-line is confusing”.

What might help improve things

A total of 57 respondents made suggestions as to what might improve worker engagement; some of these made more than one suggestion; around 20 did not answer the question, or stated that things were working well or that they did not want anything (which might not necessarily be the same thing). One replied simply: “No idea, tried everything to get people involved.”

For ease of analysis, we have grouped the suggestions into six areas, although some obviously fit into more than one group:

• Nine respondents made suggestions about how regulators and regulation might help:
  – “more HSE inspectors, increased visibility”;
  – “a more visible presence for checking premises by the HSE, to give the area a higher profile”;
  – a greater enforcement of the “duty of care” in employment;
  – “legislation supported by Approved Codes of Practice”;
  – less legislation;
  – giving representatives of employee safety the same rights as union-appointed safety representatives; and
  – a greater emphasis on responsibilities and duties.

• A dozen respondents suggested improvements in communications and management skills and practice:
– communication from senior management;
– greater soft skills for managers;
– senior management action and involvement;
– (unspecified) communication (four);
– putting in place formal management systems;
– board members and senior managers should be more aware of legislation and enforcement;
– more face-to-face interaction with offshore personnel; and
– more briefings or training sessions in smaller groups and practical by nature.

* Five respondents made suggestions around pressures and resources:
– the ability to allocate more time to the topic (four);
– better administrative support;
– “having more time to sit down with staff”; and
– the need to ensure “work continuity”.

* Eight respondents made suggestions around information and training:
– increased numbers of, and more detailed, case studies;
– information kept simple;
– easier website layouts;
– better media coverage;
– increased use of web casting (“like video conferencing”);
– more training;
– supervisory training; and
– education and national campaigns.

* Around 15 respondents commented on issues that might be broadly grouped as employee issues; nearly all of these were areas for improvements, rather than suggestions for how to make those improvements:
– “an upturn in work would raise morale and thereby involvement” (two other respondents mentioned low morale due to the recession as a problem);
– the need to increase “the commitment from staff” (two);
– the need to enthuse safety representatives;
– a need to increase employees’ awareness of risk (a low incident rate has meant the “perception of risk is complacent”);
– “getting more involvement – still a bit of ‘them’ and ‘us’”; 
– “a general awareness of the benefits” would help;
– “buy-in from all levels”; 
– “DuPont and behavioural safety”; 
– “further staff involvement creating a positive culture of feedback and idea generation on how staff can directly improve OSH”;
– help with “understanding different behaviours/characters/personality traits”; and 
– “improved willingness to be open and accommodate another person’s point of view, 360° respect”.

* Respondents also offered a small number of more tactical suggestions, four of which concerned the needs to “keep things fresh” and to “regenerate interest” of employees. “We need to refresh and re-energise periodically”, said a third, while a fourth hinted at a virtuous circle, with “further staff involvement creating a positive culture of feedback and idea generation on how staff can directly improve health and safety”. Other suggestions that are noteworthy include:
– “more focus on ‘why’ procedures are used rather than ‘how’”;
– “need to keep your eye on the ball and not have too many initiatives”;
– “prioritisation of health and safety into day-to-day schedules”;
– “changes in UK workplace culture emphasising value of worker engagement to business generally (including not-for-profit sector)”;
– introduction to basic health and safety in the school curriculum; and
– “building trust in occupational health screening and working together with the client and workforce sharing ideas”.

* Of the respondents, 48 stated said they would welcome help from external bodies to promote involvement, although few elaborated. One said they would appreciate help with benchmarking; another cautioned that it “depends on the body”; and a third reported it already received help from SEB. A fourth made a potentially interesting point: “At this point in time internal development is more important to create a cohesive team rather than to have external bodies do that for us.” Around a dozen explicitly stated they would not welcome outside help.

Innovative ideas

Asked whether they had any innovative ideas, 32 said no and 14 did not answer the questions. “No it’s all commonsense,” said one. There were, however, suggestions from 29, many of which appeared to apply to health and safety generally or specific aspects not relevant to worker involvement. Examples of those that were relevant include suggestions to:
–become involved in Healthy Working Lives (four respondents);
– introduce behaviour-based safety involvement (three);
– send staff out to industry for topical involvement;
– set up controlled hazards and invite workers to spot what was wrong (the respondent had seen this in other companies);
– give employee representatives presentation skills to build confidence;
– run innovation schemes;
– develop competencies that include soft skills;
– introduce dynamic risk assessment,
– run Q&A sessions with interactive power point;
– use “own TV clips for training”;
– enter for RoSPA and HWL awards, which had proved “very useful”;
– “drive employee ownership”;
– set up work/management forums;
– use training (one reported that “all members of staff are direct IOSH trainers”);
– use the CDM coordinator to offer services to clients; and
– demonstrate “continued commitment”.

Sharing lessons

Respondents were asked whether there were any lessons arising from their experiences of employee involvement that they would like to share. Although 16 said there were not any, and 12 did not answer the question, 46 gave examples. The interesting thing about this is that, unprompted, the vast majority of answers could be deployed in any sphere of employment and were essentially common sense observations about behaving decently, appropriately and respectfully to colleagues at work, and how this in turn brings benefits for the individuals and the business: “Employee involvement encourages employee ownership and responsible work practice”, says one. A number stated that their lessons would be words to the effect of “it works”.

The basic lessons include:

– ensure expectations are met, with another respondent emphasising the importance of setting the expectations in the first place;
– offer incentives;
– create a “positive workplace, getting them on your side”;
— “you have to get some quick wins to get them onboard; they need to see results, need to win over the more vocal staff members”;

— “working with all employees to find solutions [is] far better than coming from the top”;

— some emphasised that “staff do want to be involved”; although a smaller number noted that this was not always the case
— “it’s hard: sometimes they don’t want to be involved”;

— “be open and honest and have no hidden agenda, it enhances trust”;

— listen to, and take on board, workers’ opinions and work with them;

— “if you don’t listen to people, you don’t understand what they actually do”;

— “need to put personalities aside”;

— “employees [are] fed up of mollycoddling”.

— (as has been noted elsewhere in this analysis) involvement will not happen of its own accord, particularly in the absence of trade unions:

— “needs to be constantly reviewed and reinforced”;

— “you have to continue to work at it, has to be part of normal business”;

— watch out for complacency; and

— “need to keep the interest going”.

• A number emphasise the benefits of recognising what employees have to offer and not to be afraid to tap into the reservoir:

— “give workers more responsibility. They have the experience; let them get involved, especially on safety-related matters”;

and

— “need to have involvement of all employees; use their strength”.

• There are suggestions too as to what are essentially tactics:

— “benefits to be gained by more ‘information why’ rather than ‘instruction to’ training”;

— “the team that works together should talk together” – even informal meetings on health and safety should have some objectives, structure and follow-up. Time spent engaging with people is an investment.”

— “try to involve them but [there is a] big gulf between management and employees, sometimes [you] have to use a big stick”;

— “do not have a hierarchy of local, divisional and corporate committees”;

— senior management must support worker involvement – one respondent from a small organisation noted that “small organisation and all senior managers/directors are very approachable, helped by sharing open plan offices”;
– safety “moments” at start of meetings;
– have an open-door policy – this should start at induction and be reinforced thereafter; and
– communication needs to be clear, with a small number specifying “face-to-face”.

BOX: WHAT DOES WORKER INVOLVEMENT MEAN TO YOU?

“Getting the workforce to be involved in working safely; not being afraid to let others know if something unsafe is occurring.

Different levels of involvement; employees get involved in risk assessment; have safety committee with representatives from all depts.

Behavioural safety programme; health and safety committees; and risk assessments carried out by team leaders and operators.

Informing/involving workforce in changes in legislative requirements and how it will impact on them.

Staff being able to raise issues and solutions, being actively involved.

I prefer ‘engagement’ as this is a more powerful technique for getting effective and meaningful dialogue on health and safety.

I want all employees involved in designing work processes as well as identifying hazards.

Providing training, discussing proposed changes in system.

Representation at all levels, communication (two-way) development strategy.

Decision-making, management of change listening, discussing and agreeing the best solutions.

Worker involvement in health and safety boils down to basically ensuring staff have ownership of health and safety controls.

They have to feel part of the process or else it will be ignored, a good example of basic staff involvement is in producing non-generic risk assessments where the person carrying out the task is asked to input his/her ideas or experience into what risks could arise.

Staff have a responsibility for their own safety but must have a safe environment to work.

Consulting and communicating with employees on safety issues, eg appraisals and meetings.

My understanding would be that it means individuals taking responsibility for health and safety issues.

Involving employees in decision-making, designing work areas, things which can influence their health and safety etc, safety representatives /safety committee meetings.

Every employee has a duty of care and is responsible to contribute to the health and safety of the work environment.

Communication, team based risk assessment, health and safety training, safety committees, review boards with staff participation, safety awards and consistent feedback forums.

Employee engagement, Company values ‘brothers keeper’, SHE focus groups, HWL bronze and silver awards.
Offshore safety case – this is a document accessible to all employees and when it is periodically given its thorough review employees and their elected safety representatives take part in the review. Every morning offshore there is a “town hall” for all employers to discuss any recent incidents and up-coming activities.

Involving the workforce in all aspects of health and safety management especially in planning of objectives and action plans. Also, involvement in workforce in finding solutions to health and safety issues and problems.

All employees involved in all aspects of health and safety.

Joint consultative committee including management and volunteer workers who contribute to company health and safety practice.

Involving and listening to shop floor workers concerns and ideas.

Consideration and consultation; closed feedback loop, visible commitment and actions.

Involves workforce direct and or via safety representatives.

Everyone has responsibilities for themselves and others

Committees incorporating HSG(65).

All aspects, safety committee, safety representatives.

Doing risk assessments, consulting on major decisions.

Try to involve workforce in changes, consult at all times.

Ensure staff are aware of health and safety via bulletins/intranet.

Working parties meet 12 weeks, all employees have access to health and safety through these, local to corporate level.

Active participation at all levels, big drive on risk assessment at all levels.

Committee/representatives in place, meetings, telephone and email.

Proactive workforce involved at all levels; groups and single employees.

Giving them the opportunity to be engaged and prevent problems.

Getting the views and opinions of staff on health and safety issues and engaging them in practical issues.

Involvement in the planning of all work activities.

Staff involvement in the planning of the works and at all levels during the contract basically from ‘cradle to grave’.

To involve in all safety aspects, suggestions for improvement.

For us it means including the workforce in regular meetings, site inspections, accident investigation and risk assessments, and general involvement in health and issues.

Worker involvement means training of staff and attending regular safety meetings.
EHS integration is about getting people involved and engaged.

Extensive involvement across a broad range of safety control measures, method statements.

Everybody is responsible for safety.

Really means participation, consulting and communicating.

Everybody participates in health and safety committees and has an input to system changes.

Safety meetings every two weeks, tool box talks, worksite assessment, health and safety campaigns

Network groups, flow of information and assist understanding of policies and procedures.

Workers are involved in all operational aspects and all safety functions are carried out by staff, representatives, fire wardens etc

Staff are involved in everyday operational activities, site safety committee, also inspections.

Consultation – two-way communication on health and safety matters.

Consulting with all staff at all levels, two main topics: hazards in the workplace and new and existing policy and procedures.

Workforce ownership of safety issues and practical safety measures.

Members of the unions can be consulted and get involved in health and safety activities and have management executive meetings to ensure health and safety issues are resolved.

We have an open door policy and consult regularly on health and safety issues.

Its how we address it to our staff and how they apply it offshore and getting feedback.

I believe that they should be involved in policy and procedures but it should be beyond consultation and is a working partnership

We actually communicate and ensure consultation and participation when needed on health and safety issues.

It means getting everybody all trades, all grades getting involved

A well known principle where people are asked for their opinions in decision-making as involvement brings ownership.

Worker involvement is the requirement to include employees in anything that affects their wellbeing and involving in any changes in work practice that would affect them.

Everybody knows the rules and we work by good ethics.

Basically involvement in all stages of the management of safety.

To ensure all fully focus on health, safety and the environment.

For staff to have more involvement in health and safety on site in all aspects of health and safety management.

Involvement in health and safety at all levels is expected.
Getting them involved in daily health and safety activities.

Worker involvement is part of your whole management system, a TQM approach.

Means getting everybody involved everyday at all levels, empowering them to take care of their own safety and individual site safety responsibilities.

Everybody is trained in health and safety.

Everyone working together from the bottom so everyone knows what's required in order to work safely.

All workers with representatives play a part via meetings.
Pre-course preparation

Worker Involvement as a cornerstone for health and safety improvement.

Evidence shows that businesses with good workforce involvement in health and safety perform better when it comes to managing health and safety measures. They also tend to have better productivity and higher levels of workforce motivation.

Workforce involvement strategies can include consultation, team based learning and problem solving, toolbox talks, regular safety committee meetings and behavioural safety initiatives.

The following question set will encourage you to consider how you currently engage workers in business related decision-making, the trends emerging from group responses will be used to structure discussions during your training.

Contact Name........................

Address...........................................................................................................
...........................................................................................................
...........................................................................................................

Telephone No...........................................................

Reference No...........................................................

About Your Organisation

• Do you recognise trade union(s) at your workplace for health and safety purposes?
  ......................................................................................................................
  ......................................................................................................................
  ......................................................................................................................

• If so, how many unions do you recognise? Please specify.
• How many workers (or what proportion of the workforce) belong to each union?

• If you do not recognise unions, do you have workers in unions?

• Where you have unionised and non-unionised workers, do you deal with health and safety consultation through unions solely or do you also consult non-unionised workers (individually or through a separate structure)?

• Which sector does your organisation operate in?

• What are your key business activities?

• How long has your organisation been established?

• Are you a single site or multi site?

• Are you part of a group or parent company?

• How many permanent employees do you have?

• How many temporary employees do you have?

• How many contractors?

• What was your annual average turnover over the last three years?
• Are you a member of a trade association(s)? If so, which one(s)?

• Do you have a named board member responsible for championing H&S issues?

• Do you employ an in-house H&S adviser or use an external consultant? Give details.

• Has your organisation received an enforcement notice or been prosecuted for a health and safety issue in the past three years?

• Are you familiar with either the SRSC or RES Regulations and, if so, whether you believe you comply?

Your understanding of workforce involvement in H&S

• What do you understand by the term ‘worker involvement’ in the context of health and safety management? Provide a short explanation in your own words with examples if possible.

• What is your understanding of your organisation’s legal obligations to consult with its employees on health and safety matters? Provide a brief summary.

• In your view does the current law help or hinder effective involvement in your business? Give reasons.
Your organisation’s approach

- What systems and/or structures do you use to support worker involvement initiatives:
  a. Representatives of Employee Health and Safety?
  b. (non-unionised) health and safety committees?
  c. Consultative councils?
  d. Employee opinion surveys/questionnaires?
  e. Quality circles?
  f. Weekly meetings?
  g. Suggestions schemes?
  h. Confidential reporting lines?
  i. Behavioural safety programmes?
  j. “Whistleblowing” to senior manager
  k. anonymised reporting systems
  Other? Please state

Communication

- Which of the following methods does your organisation use to communicate health and safety information to the workforce?
Consultation

- Do you consult workers on any of the following health and safety matters:
  a. Periodic revision of your organisation’s health and safety policy statement?  Yes/No
  b. Development of its health and safety management systems? Yes/No
  c. Setting strategic priorities and improvement targets?  Yes/No
  d. Selection of competent persons and other H&S services? Yes/No
  e. Generic risk assessments? Yes/No
  f. Task or subject-specific risk assessments Yes/No
  g. Selection of control measures and/or safety equipment? Yes/No
  h. Specific policies/standards/procedures? Yes/No
  i. Incident investigation procedures? Yes/No
  j. Complaints investigations procedures? Yes/No
  k. Monitoring procedures? Yes/No
  l. H&S implications of future plans, including the introduction of new procedures, work processes, equipment or product? Yes/No
  m. Occupational health and well being? Yes/No
  n. First-aid procedures Yes/No
  o. Other? Please state

Support/benchmarking

- Does your organisation provide training and/or facilities/support for employee reps and/or supervisors/team leaders? Can you provide examples?

- Do you allow paid time off for employee reps to undergo health and safety training?

- Do you benchmark/compare your approach with other organisations?

Impact/barriers

- Has getting your employees involved in health and safety work realised any benefits (for example, reduced injury or absence rates, improved productivity, enhanced morale, better workforce relations)?
• Do you have any examples of good practice of which you are particularly proud?

• Are there significant barriers to effective involvement and consultation?

Information

• Where have you sought information from on involving employees in health and safety matters?
  a. the HSE
  b. local authority
  c. another enforcing authority
  d. online HSE guidance
  e. paper HSE guidance
  f. other official guidance
  g. other published sources (please specify)
  h. a consultant
  i. trade unions
  j. RoSPA
  k. another safety organisation

How helpful have you found the sources that you have used?

The future

• What might help improve things?

• Would you welcome support from external bodies to promote involvement?

• Do you have any innovative ideas?
• Are there any lessons arising from your experience of employee involvement that you would like to share?

• In principle, would you like to take part in a workshop to discuss these matters?