

Joint guidance for reduced proactive inspections

1. This statement is jointly prepared by the Health and Safety Executive (HSE) and the Local Government Group. It is intended to assist LA regulators in determining the use of proactive interventions to achieve both improved health and safety outcomes for each locality and the Government's regulatory reform agenda.
2. Under Government reforms announced in its publication '*Good Health and Safety, Good for Everyone*', protecting people in the workplace and wider society still remains a key priority. The Government's aims for health and safety reform include reducing the inspection burden on business alongside focussing on better health and safety outcomes. Refining the intervention strategies for businesses by further improving the targeting of relevant and effective interventions and preserving inspection for higher risk premises and issues should lead to a reduced number of proactive inspections. Reducing the aggregate numbers of proactive inspections by a third across all local authorities will free up capacity for more effective outcome focussed interventions.
3. We know that many local authorities already target their interventions¹ on the basis of risk (given national and local knowledge about the sector/ premises) and have re-rated all their premises in accordance with LAC 67/2 so that premises are only visited proactively where they are considered high risk (relative to other LA enforced premises). This guidance reinforces that approach in the expectation that if any LAs are not already applying this way of working they will see the benefits of doing so. An LA case study and links to further information are provided below.

Targeting interventions

4. '*Good Health and Safety, Good for everyone*' sets out that:

The HSE and local authorities, as joint co-regulators for health and safety legislation, have a vital role to play in ensuring that the regulatory system is:

Focused on better health and safety outcomes and not purely technical breaches of the law;

5. LAs can achieve this by using national priority planning material and local information to determine the key causes of serious workplace accidents, injuries and ill-health and to develop intervention plans for poorly performing businesses. For councils their focus may be broader than specific health and safety outcomes as they can also have an impact on wider public health outcomes/ health inequalities. LAs should use all available evidence to help them to target effectively.

6. HSE have identified three categorisations for non-major hazard industries:
 - a) *Those sectors which present comparatively high risk and where proactive inspection remains necessary as part of the overall regulatory approach* - areas for LAs to consider under this would be category A premises as set out in LAC 67/2.
 - b) *Those sectors where there remains comparatively high risk but proactive inspection is not considered a useful component of future interventions* - areas for LAs to consider under this would be category B1 and B2 premises as set out in LAC 67/2.
 - c) *Those areas where proactive inspection is not justified in terms of outcomes* - areas for LAs to consider under this would be category C premises as set out in LAC 67/2.

Makes it as straightforward as possible for business, and in particular, small businesses, to deliver a health and safe working environment;

7. LAs achieve this by increasing the provision of accessible and usefully tailored information/interventions to meet specific business or sector needs e.g. websites should be kept relevant and up to date, HSE publications should be signposted accordingly.

Is enforced in a manner which is proportionate to risk;

8. LAs achieve this by fully implementing the risk rating system as set out in LAC 67/2 and carrying out enforcement in a proportionate manner in line with their enforcement policies, HSE's Enforcement Policy Statement and the enforcement management model.
9. When determining their intervention strategies LAs should have regard to the risk profile of the business/sector collating both national information (accident statistics, planning priorities, Primary/Lead Authority Inspection Plans) and local knowledge to determine the appropriate intervention(s). LAs should consider the full range of interventions available to them and reserve proactive inspection for where it will have the most effect.
10. Exceptions to this approach might be where local priorities require action or where there is an incident or complaint. HSE has developed incident selection criteria and a risk based approach to complaint handling – a number of LAs have already adopted these and others should consider the benefits of doing the same.

Avoids placing unnecessary burdens on businesses that manage health and safety effectively;

11. LAs achieve this by ensuring that the risk rating system and the frequency for interventions as set out in LAC 67/2 has been fully implemented. This will determine those businesses that require attention in the form of a proactive

intervention and those that are either low risk or who are managing health and safety well.

Maintains a strong deterrent against those who fail to meet their health and safety obligations and put their employees at material risk thereby also deriving an unfair competitive advantage.

12. LAs achieve this by continuing to take proportionate enforcement action in accordance with the enforcement management model. LAs should publicise successful enforcement action to maintain a strong deterrent effect.

Combined Interventions

13. HSE, the Food Standards Agency and Local Government Regulation published a joint statement on combining health and safety and food safety interventions where appropriate. Local authorities should continue to consider combining intervention programmes (wherever this is appropriate) as this provides effective use of resource. However, this should not have the effect of increasing the overall number of inspections or reducing levels of protection.

14. Additionally, if during other interventions (e.g. during a food hygiene inspection) a matter of evident concern on health and safety is found then this should be dealt with accordingly.

Reactive work

15. In order to target those businesses that are poor performers and not meeting the requirements under health and safety legislation, it is felt that greater emphasis should be placed on reactive work - dealing with complaints, accidents and incidents in accordance with published procedures. LAs should therefore continue to make adequate arrangements for enforcement in accordance with the Section 18 Standard and toolkit.

Revision of Guidance

16. LAC67/2 will be revised to better reflect the shift in emphasis these reforms bring. In the meantime, the targeting of interventions based on risk categorisation (as outlined in paragraph (6)) should be considered by LAs from April 2011 onwards.

May 2011

Case Study - Islington Council

Islington Council's positive response to budget reductions has led to a re-focussing of effort on higher risk issues while exploring opportunities to deliver health and safety outcomes through partnering and leverage with other organisations.

Islington Council has:

- Worked hard to maintain a high corporate profile and prepared for the forecast budget reductions;
- Used analyses of the scale and impact of poor health and safety on the local economy to explain the benefit of services;
- Made the case for action exploiting links with national, regional and corporate strategic priorities and used these to steer direction;
- Challenged service priorities and cut out unnecessary activities and duplication through line by line budgeting and detailed process mapping;
- Dropped low risk projects and made back-office reductions in support and accommodation;
- Undertook only meaningful risk-based inspection and priority project work;
- Spent relatively less time on education and persuasion and more on enforcement;
- Encouraged the flexible and multi-functional use of professional staff within their wider Environmental Health team;
- Combined food and health and safety inspections with a focus on non-compliant businesses;
- Partnered with other teams, services and agencies such as business support teams and linked with organisations such as chambers of commerce to enhance reach/ effect through others across a range of activities;
- Encouraged an ethos to exploit any future opportunities including the public health agenda, primary authority, cost recovery and working with other LAs

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Links:

Good health and Safety, Good for Everyone

<http://www.dwp.gov.uk/docs/good-health-and-safety.pdf>

Section 18 Standard

<http://www.hse.gov.uk/section18/index.htm>

LAC 67/2

<http://www.hse.gov.uk/lau/lacs/67-2.htm>

Enforcement policy statement and Enforcement management model

<http://www.hse.gov.uk/pubns/hse41.pdf>

<http://www.hse.gov.uk/enforce/emm.pdf>

FSA, HSE and LG Regulation Statement - Combining Health & Safety and Food Safety Inspections

<http://www.lacors.gov.uk/lacors/ContentDetails.aspx?authCode=27DE5C9&id=24846>

Incident Selection Criteria & risk based approach to complaints handling

<http://www.hse.gov.uk/foi/internalops/og/ogprocedures/>

Sensible Health and Safety at Work – The regulatory methods used in Great Britain

<http://www.hse.gov.uk/aboutus/strategiesandplans/sensiblehealthandsafety.pdf>

ⁱ **There are thirteen principal interventions used by HSE and LAs.**

Interventions before and at the point of creation of risk

1. Partnership
2. Motivating senior managers
3. Supply chain
4. Design and supply
5. Sector and industry-wide initiatives
6. Working with those at risk
7. Education and awareness

Interventions at or during exposure to risk

8. Inspection and enforcement
9. Intermediaries
10. Best practice

11. Recognising good performance

Interventions when the consequences of exposure to risk arise

12. Incident and ill-health investigation
13. Dealing with issues of concern that are raised, and complaints