

PROGRAMME PROPOSAL

HEALTHY & SAFE TOWN.

Local Authorities and HSE Working Together

Partnership Group Yorkshire, Humberside and the North East.

Compiled by the; Healthy and Safe Town Working Party.

Members;

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1. Outline and Principal aim of the proposal.

- 1.1 The principal aim of healthy and safe town is to make sustainable improvements in Safety and Health arising from work activity. Through this proposal LA's have an opportunity to influence a group of people who may be of assistance in delivering aspects of the wider LA agenda, e.g. Securing Health Together. HSE Inspectors can assist in this process. The programme relies upon working in partnership with LA /HSE, local businesses, employer organisations, key players in the community, local safety groups, potentially NHS / PCTs etc. This should include the working community and those that govern the community. This proposal is flexible in that it can be free standing or form the basis of LA / HSE involvement in already existing safe community initiatives.
- 1.2 The proposal is centred around holding a healthy and safe town week, in a dedicated location, during which the targeted stakeholders join together to promote safety and health. A key theme of this proposal is sustainability.
- 1.3 It is a multi component approach particularly reliant upon;
 - A, The provision of appropriate information and support and,
 - B, Visits and presentations by inspectors and competent persons.
- 1.4 Implicit in the proposal is the opportunity for each target town or city to influence their own agenda and prioritise the activities most relevant to their working community. All within the framework of the HSC strategy programme. It is a vehicle for carrying the Right First Time principals into Health and Safety activity, which ought to result in an economic benefit within contributing organisations

2. Background

- 2.1 In order to assist in meeting the revitalising health and safety targets set for 2010 Local Authorities (LAs) and the HSE will need to work in genuine partnership and use a mixture of intervention techniques.
- 2.2 Traditional inspection visits often do not have a sufficient reach into the working community to have the overall impact required to achieve the RHS / HS2 / and the PSA targets. Those persons at greater risk often work in areas outside of the influence of the regulator. Their Health and safety may well be achieved by an alternative way of spreading the Healthy Happy and Here message which is contained within the FIT3 Programme – fit for work, fit for life, fit for tomorrow. Good communication between businesses, stakeholders, and competent persons to effect an

increase in the awareness by the employers and employees are ways of achieving the targets.

2.3 The concept contained in this programme proposal “Healthy and Safe Town” is a means of achieving this improvement.

3. Aims

- 3.1. To pursue the revitalising health and safety targets through partnership working between LAs and HSE.
- 3.2. To assist in the development of an enhanced partnership between LAs and the HSE and the wider community of stakeholders
- 3.3 To improve the management of health and safety in businesses with a focus on the priority topics
- 3.4 To achieve sustainable improvements in the management of workplace health, safety and welfare in dedicated area
- 3.5 To utilise, in a novel and invigorating way, skills already existing in the LA / HSE community to achieve objectives outlined in the wider government agenda.
- 3.6 It is proposed that each town could operate on a six-month time scale from decision to proceed in any individual town to holding an event.

4.0 Objectives

- 4.1 To assist in the reduction of accidents & work related ill health arising from work activity, particularly in relation to the priority hazard topics of workplace transport, musculoskeletal injuries, Falls, slips / trips, Stress.
- 4.2 To increase the ability of duty holders and employees to manage risks by telling them about the key messages from Intervention campaigns. This can be achieved by advising employers and employees about their legal obligations relating to workplace safety, health and welfare.
- 4.3 To provide examples of good practice that can be shared by LA’s / HSE and communicated to duty holders. To share with stakeholders information on health and safety issues that are most relevant to the community
- 4.4 To identify further areas of research or intervention and disseminate to appropriate units within HSE and/or LAs
- 4.5 To take advantage of the benefits of working in partnership with other enforcing authorities by:

Supporting & learning from each other.

Dealing with what neither HSE nor LAs can effectively deal with on their own.

Promoting consistent approaches between LA's and HSE.

Providing access to suitable information on current best practices in relation to occupational health and safety management by;

- Encouraging key organisations involved with the working community in locality to take ownership of the health, safety and welfare of their working population and promote a safer working culture in all workplaces.

5. Scope

5.1 Target Stakeholders. (generic)

Identification of specific stakeholders who can contribute to the proposal will be required at each unique location.

The following is a generic list of stakeholders;

Business organisations.	Community help groups
Education / training centres	Emergency services
Employee groups	Enterprise groups
Safety organisations	NHS / PCTs to include Ambulance services
Professional bodies	Regional advisory bodies
Agricultural organisations	Trade unions
Emergency services, Police, Fire, Coastguard	
Accountants	Insurance companies
Accredited Bodies	Other Regulatory Bodies CSCI / EA / VOSA

5.2 Target Businesses. (generic)

Small Medium Enterprises (to include manufacturing and food.)

Construction

Commerce

Retail

Transport to include Delivery / Logistics / Public Services / MVR

Agriculture

Care Industry

Hotel and Catering

5.3 Primary topics to be addressed:

The major causes of injury and ill health related to:

- Being struck by a vehicle
- Falls
- Manual handling
- Slips and trips

- Muskulo Skeletal
- Stress
- Asthma and exposure to asthmagens

5.4 Secondary topics to be addressed:

- Local issues which surface during the set up phase of the proposal.
- Absence management
- Rehabilitation
- Occupational health support

Matters of evident concern to be addressed when encountered.

6.0 Geographic Areas

The project will operate in the following County areas: To be defined.

7.0 Exclusions:

The activities of the vehicles travelling on a highway will not be included.

8.0 Benefits for Participating Town or City;

Opportunity to;

- Linking LA / HSE Activity to community plans
- Creating safer and stronger communities
- Contributing to improving community safety
- Creating a healthier working environment
- Benefit from specialist health and safety advice
- Develop links with regulatory and other experts
- Obtain sector specific advice
- Opportunity during workshop sessions and seminars to highlight concerns
- Demonstrate commitment to good practice
- Lead to better understanding of work place health and safety issues
- Foster a safety network and a safer working culture in the community
- Develop proposals for a Science and technology funding bid e.g. researching methods of engaging business in health and safety initiatives.

9.0 Method

The project will consist of 4 phases: NB The process must by necessity rely upon a dedicated group of persons to drive the process in a particular area. This group is to be

known as the campaign team. A threat to the process exists in any lack of commitment of a campaign team member, either personally or corporately.

9.1 Phase 1 (Timing to be agreed)

Set up and Intelligence Gathering

- Arrange a campaign team (CT) to initiate and maintain the campaign. This group could take the form of an overarching group who will give advice and guidance of a generic nature to the programme.
- Formalise the role of the campaign team
- Through local knowledge and by contacting duty holders LA's and HSE will identify suitable business to be included within the main phase of project.
- Any RIDDOR reports to be assessed and may be used to identify suitable visits either for the main project or as a pilot.
- Comprehensive list of stakeholders to be compiled.
- Identify the needs of the local working community, and explore ways of engaging the target community.
- Form a project plan and agree a timetable of events.
- Arrange for media campaign
- Liase with other regulators
- Consult with HSE statistics branch for accident / ill health data
- Build on intelligence gathered from the assessment of the success of the Agricultural Safety Health and Awareness Days
- Identification of Local champions.

NB. Through the ELO the partners should be able to liase with each other to ensure overall coordination in dealing with organisations and ensure that where appropriate the whole of the supply chain is inspected.

This will require close liaison between all the parties because of joint visiting and the restricted availability of some staff. The arrangements for individual visits should be made by the EA for the premises.

9.2 Phase 2 – (timing to be agreed)

Set up a Healthy and safe town campaign week

1. Formalise the role of the CT with an agreed team leader to drive the campaign at local level. (This component may take the form of a local campaign team specific to the area of the event.)
2. Agree on a Campaign Week to be centred in the town.
3. Agree and finalise a timetable of events for the week.
4. Finalise logistical arrangements for facilities and personnel to organise the main events of the campaign.
5. Co-ordinate a targeted media-advertising programme to highlight the campaign locally.

6. Establish criteria for and a time scale when the Campaign will be evaluated.
7. Develop arrangements to coordinate visits to occupiers

9.3 Phase 3 – (timing to be agreed)

Hold event Week.

- a. Seminars for consideration;
Noise, stress management, information evening, fire safety, risk assessment and policy statement, competency, food safety, environmental safety, care home safety (CSCI), safety management, manual handling, construction safety, safety law.
- b. Information spreading;
Press / media campaign, work place visits, free advice days, rent an inspector for an hour campaign,
- c. Regulatory visiting,
Mechanism for regulatory visiting during event week should be agreed with local campaign team, and due consideration should be given to advance warning of occupiers, possibly through a media campaign or appointment basis. Other considerations at this stage to include proforma reporting of inspections
- d. Publicity caravan,
Self-explanatory suggestion.

9.4 Phase 4 – (? months after event)

Follow up and Evaluation

Revisits will be made where formal action has been or may be required.

10.0 Legal

10.1 Enforcement decisions will be taken by the enforcing authority (EA) for the relevant activity. The decision making process will be guided by the relevant EA enforcement policy and the Enforcement Management Model (EMM).

Authorisations to accompany will be issued by the relevant EA where joint visits are planned.

11.0 Resources

11.1 This project is cross cutting and contributes to many other HSE national initiatives to which HSE will have allocated resources and which LAs are encouraged to participate. Visits can be made to businesses due for inspection in 05/06 or could be visited as a result of complaints or RIDDOR reports. Generally this will reduce additional resources required for this project

11.2 These resources may be double counted for inclusion in other national projects, such as BACKS 05, SLIPS and TRIPS, LADDER WEEK, when they are within that projects scope

A key decision to be made by partners contributing to this proposal is to agree to the extent to which they can allocate labour hours to the project.

12.0 Sustainability

- 12.1 The evaluation report will identify recommendations for further actions. This will include the cascading of information and evidence to stakeholders and identify whether any education campaigns would be relevant and useful.
- 12.2 Further measures of sustainability will be developed over the campaign life, and may include the introduction of an award scheme, which could assist business to illustrate the benefits of the proposal.

13.0 Support, Information and training

- 13.1 All officers undertaking the project will have access to the following training:
- MSD BACKS campaign training
 - Work at height
 - Slips and Trips
- 13.2 An inspection support pack (CD) will be provided for each inspector that will include:
- Briefing pack, for personal use
 - Briefing pack for distribution to stakeholders
 - MSD BACKS campaign support information
 - Workplace transport campaign support information
 - Slips and trips support information
 - Relevant topic inspection packs
 - Specific guidance notes, OCs, OMs, LACs
 - Inspection aid-memoir
 - Suggested paragraphs for notices
 - Contact list for specific advice and further guidance
- 13.3 Specialist Inspectors and HSL members may be requested, where necessary, through the normal ELO channels. If inspectors are already aware of premises where specialist advice will be necessary they should contact the ELO at the earliest opportunity, also where specialist input is required to the programme representation should be made at the earliest opportunity.
- 13.4 A contact list will be provided for telephone advice from specialist inspectors or HSL, e.g. ergonomists.

14.0 Evaluation

14.1 It is for the campaign team to develop the method of evaluating the success of the proposal when it becomes clearer which areas and topics any particular campaign will be addressing.

Typically evaluation techniques may include;

14.2 After each visit or meeting with a stakeholder a questionnaire will be left with the responsible person to establish how effective and useful the visit / meeting had been. This could also include a component to assess the effectiveness of partnership working. These will be anonymous to encourage return.

14.3 A 10% sample of businesses will be revisited and a further 20% sent a self assessment questionnaire to establish whether there had been an improvement in health and safety management and performance. This will be achieved by re-assessing the topic inspection rating score.

A project report will be produced that includes these evaluation results detailed consideration should be given on a local basis to means of evaluating the sustainable benefits arising from this proposal. Suggested time intervals for this component to be agreed by the campaign team.

15.0 Measurable outcomes (suggestions)

- Companies contacted
- Creation of Health and Safety Partnerships
- Improved compliance demonstrated by rating change
- Duty holder perceptions of the project
- Number of requests for advice
- Reduction in accidents / ill health
- Sustainable arrangements made by stakeholders to continue process
- Number of persons seen
- Number of delegates attending seminars
- Number of other regulatory bodies introduced to process
- NB Further measure to be sought by campaign teams.

15.1 Measures of Success

	OUTCOME	MEASURE
a	Working community takes ownership of its own health, safety and welfare	Better awareness of legal obligations Better educated working community Awareness of best practice
b	Safer working culture is achieved	Willingness to share ideas and learn from experiences
c	Measurable improvement in the health, safety and welfare achieved	Reduction in the number of reports of work-related accidents and ill health
d	Better working relationships between managers and employees, and between local companies	Responses from feed-back survey Discussions with individuals during inspections
e	Improved HSE/LA working relationship	Discussion with representatives from project team
f	Demonstration to other LAs that partnership working is effective	Discussion with HSE & LA representatives, and key stakeholders involved in the project
g	Measurable improvement in HSE/LA profile through the positive use of the media	Independent verification by news monitoring
h	Positive references to the key HSC strategic messages	Evidence in specific reporting of key words and phrases

16.0 Assumptions and risks

- Evaluation will show that the work will achieve sustained benefits and reduce accidents or ill health
- Sufficient resources from and the co-operation of LAs and the HSE
- Obtain suitable and sufficient co-operation from businesses

16.1

RISK	COUNTERMEASURE	LIKELIHOOD
Major partners to the proposal cannot allocate sufficient resources to project	Shared resources from other HSE regions and LA areas.	Possible
Major incident involving HSE/LA in a reactive role	None	Always possible
Poor buy-in by key stakeholders	Enthusiastic leadership & well organised campaign team	Medium
Lack of media interest	Targeted media strategy to highlight the campaign locally	Low
Unavailability of key	Keeping other persons	Medium

personnel e.g. through sickness	outside of the project team fully briefed	
Confusion amongst working community about the purpose of the campaign	Clear, unambiguous message delivered by campaign team & the targeted media strategy	Medium
Suitable facilities and venues not available for campaign week	Early booking	Low
Lack of Public attending campaign events	Clear and simple media campaign themes	High

17.0 Safety

17.1 HSE safety guidance and supplements will be reviewed specifically for the project and will be issued in the briefing pack. LAs should also comply with their own risk assessments and procedures.

