

The Continuous Improvement Programme Action Group are:

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The Group were invited to consider how the occupational health community could act upon the continuous improvement programme, as set out in Securing Health Together:

*Striving for excellence through continuous improvement in occupational health*

The purpose of this programme is to promote a culture and environment where occupational health issues are addressed through interested parties:

- collaborating;
- forming partnerships;
- valuing innovation; and
- striving for continuous improvement in occupational health because they want to be among the best.

This programme will include promoting good health at work beyond the legal minimum of preventing work-related ill health and adjusting work environments to accommodate people not currently in work due to ill health or disability. It will also encompass using the work environment to tackle the non-work contributors to work-related ill health; doing all that is required to rehabilitate individuals after ill health; and to promote general health. Champions, committed individuals with knowledge of the strategy and its links with other initiatives, will be used to help progress the strategy within different sectors and professions.

## **1. Introduction**

1.1. This report of the Securing Health Together Continuous Improvement Programme Action Group contains a model for continuous improvement in occupational health and safety culture. The Continuous Improvement Programme Action Group first met in September 2001, and have held six meetings. Together the members represent a wide range of organisations concerned with Occupational Health<sup>1</sup>, and have links to industry, trade unions, government, education and the health service.

## **2. The development of the Continuous Improvement Model**

2.1. The Continuous Improvement Programme Action Group wanted to set their proposals within a model that would describe where employers might stand on an 'escalator' for continuous improvement in occupational health and safety culture. Their approach was similar to the approach taken by the marketing industry. In brief, the characteristics of the individual or group are considered and they are allocated to a broad 'market segment' which then informs the practitioner how they should be approached.

2.2. In this case the company or groups of employers are not segmented by income, postcode, educational background or industry, instead they are segmented on the basis of the development of their occupational health and safety culture. They can be examined to see if they are not interested at all in occupational health and safety, if they simply comply with the health and safety requirements, or if they are enthusiastic occupational health and safety advocates. Identifying where they are in terms of their cultural development allows the development of an appropriate strategy for helping them. The categories mentioned (not interested, complier and the advocate) are thought to be useful 'segments' as they are fairly clear and are quite descriptive. This approach can identify succinctly what is needed to move along a continuum from 'not interested' to 'advocate'.

2.3. The outline for this model was developed by Neil Budworth, then modified and adopted by the other members of the Continuous Improvement Programme Action Group. Later Neil Budworth and Sayeed Khan did some further work to develop a parallel model to represent the individual, which is also included in this report.

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<sup>1</sup> Occupational health in its broadest sense - that is anything concerned with the impact of work on people's health or the impact of a person's health on their work, and the use of the workplace environment to promote health.

### **3. The escalator model for continuous improvement in occupational health**

3.1. This model describes three main employer or employee groups:

- those not interested
- the complier
- the advocate.

3.2. These three are set in a matrix against a description of:

- what drives the company to achieve that level of performance
- what distinguishes higher achieving companies from lower
- likely perceived issues for the company, and
- the things they need to progress to the next level.

#### *3.2.1. Drivers*

To understand what drives each of these groups. The same thing does not motivate all organisations. In particular motivations for those who have yet to start on the occupational health journey are very different to those who are already very good. For example, fear of legislation often motivates those who are just considering what occupational health actions they need to take, whilst for the very good organisation it might slightly influence the shape of some of the standards applied that are already in excess of the legal standard. Generally speaking for the advocate legislation is not a prime motivator.

#### *3.2.2. Differences from Previous Level*

What makes each level different from the previous level. What has changed in order for them to progress? This is important as it helps us to recognise what success looks like so that we can evaluate if things have indeed changed.

#### *3.2.3. Issues and ....*

The hurdles that could prevent progress. If correctly identified such blocks can be dealt with; if not, they can stop an organisation progressing. Where the block is due to ignorance it can generally be overcome either through awareness or the provision of practical assistance. Yet again these will be different depending on how developed the organisation is.

*3.2.4. ... Needs to Progress To Next Level*

3.2.5. These are the actions that are required in order to address the issues previously identified. If these are provided then they should assist the organisation in developing in Occupational Health terms.

3.3. The Continuous Improvement Programme Action Group completed matrices based on their general experience for non-specific groups of employers and employees. The completed matrices are included in this report.

3.4. The matrices are therefore considered to be likely to be widely applicable but the same exercise could be completed within a specific sector, region or for other smaller groups who might have significant characteristics affecting their occupational health culture.

**Continuous Improvement Cycle – Model**  
**Segmentation of Employers**

The Not Interested or Those yet to be Fully Engaged	The Complier	The Advocate
<p><b>Basic Drivers for this category</b></p> <ul style="list-style-type: none"> <li>• Enforcement</li> <li>• Regulation</li> <li>• Insurance</li> <li>• Cost</li> </ul>	<p><b>Basic Drivers for this category</b></p> <ul style="list-style-type: none"> <li>• Enforcement</li> <li>• Regulation</li> <li>• Insurance</li> <li>• Cost</li> <li>• Humanitarian concerns</li> <li>• Benchmarking</li> <li>• Embarrassment if “caught”</li> </ul>	<p><b><i>Basic Drivers for this category</i></b></p> <ul style="list-style-type: none"> <li>• Cost – Investing in health to save in the future</li> <li>• Insurance</li> <li>• Humanitarian concerns – translated into action</li> <li>• Understanding</li> <li>• Desire to be excellent</li> <li>• Reputation / Brand Image</li> <li>• Corporate social responsibility</li> </ul>
	<p><b>Differences from lower level</b></p> <ul style="list-style-type: none"> <li>• Awareness – higher level</li> <li>• Resources applied to management of H&amp;S</li> <li>• Expertise - some limited access to advice</li> </ul>	<p><b><i>Differences from lower level</i></b></p> <ul style="list-style-type: none"> <li>• Awareness - understanding of business costs of poor performance</li> <li>• Awareness - OH staff better able to articulate arguments and have the ear of senior managers</li> <li>• In some cases -size - often large companies have enough employees to see various OH issues manifest themselves and as such they are seen as real business issues.</li> <li>• Expertise – high level often available in house</li> <li>• Visible senior management commitment</li> <li>• Measurement</li> </ul>
<p><b>Issues</b></p> <ul style="list-style-type: none"> <li>• Lack of awareness of OH issues</li> <li>• Lack of awareness of the scale and severity of the issue</li> <li>• No perceived access to expertise</li> <li>• Cost – concern about; blank cheque for treatment</li> </ul>	<p><b>Issues</b></p> <ul style="list-style-type: none"> <li>• Often OH is not integrated into the day to day management of the business</li> <li>• Line management do not perceive the need for the management of ‘softer’ issues.</li> <li>• Often a restricted view of the role</li> </ul>	<p><b><i>Issues</i></b></p> <ul style="list-style-type: none"> <li>• Where does OH stop?</li> <li>• What are the issues that we can effectively manage in the future?</li> <li>• Can possibly delay decisions because “everyone” consulted</li> </ul>

<ul style="list-style-type: none"> <li>• No internal resources</li> <li>• Belief that they won't get "caught"</li> <li>• In some cases profit before people</li> <li>• Not looking at long term / sustainable business</li> </ul>	<p>of OH</p> <ul style="list-style-type: none"> <li>• Complier who uses the letter of the law may not be complying in a morally good way</li> </ul>	<ul style="list-style-type: none"> <li>• Difficulty keeping tabs on all activities that are being done</li> </ul>
<p><b>Needs to get to next level</b></p> <ul style="list-style-type: none"> <li>• Understanding of issue</li> <li>• Understanding of a proportionate response</li> <li>• Easy low cost access to OH support.</li> <li>• Push from insurers</li> <li>• Simple activities which can be undertaken by staff with minimal training</li> <li>• Individual to champion the cause</li> <li>• Mentoring from other businesses in 'Advocate' Group</li> </ul>	<p><b>Needs to get to next level</b></p> <ul style="list-style-type: none"> <li>• Stronger emphasis on OH in management training</li> <li>• Best practice examples from exemplars</li> <li>• Supply chain / peer pressure</li> <li>• Development of OH champion</li> <li>• Mentoring from other businesses in 'Advocate' Group</li> </ul>	<p><b><i>Needs to get to next level</i></b></p> <ul style="list-style-type: none"> <li>• Competitions for ideas in key areas (open area up to those beyond traditional stakeholders e.g. Back in Work programme)</li> <li>• Exchange forums</li> <li>• Involvement in education of next generation whether large company or SME</li> <li>• Additional employee ownership</li> </ul>

**Continuous Improvement Cycle – Model**  
**Segmentation of Employees**

<p><b>The Not Interested or Those yet to be Fully Engaged</b></p>	<p><b>The Complier</b></p>	<p><b>The Advocate</b></p>
<p><b>Basic Drivers for this category</b>            Rules            Enforcement / Discipline            Financial Motivation            Personal Gain (even when others may lose)            Managerial Drive            Reinforcement of previous poor behaviour            Peer Approval / Pressure            Comfort            Custom and practice behaviours</p>	<p><b>Basic Drivers for this category</b>            Personal commitment            Personal engagement            Personal equity            Safe Systems of Work            Procedures            Reinforcement of correct behaviour            Knowledge and understanding of risk            Managerial drive            Availability of equipment            Comfort and look of equipment            Reward structures</p>	<p><b><i>Basic Drivers for this category</i></b>            Personal belief            Engagement            Feedback            Personal Goals and objectives            Expectations            Knowledge            Life-long learning behaviours</p>
	<p><b>Differences from lower level</b>            Motivation            Knowledge            Activity            Acceptance that they may be involved in an accident / case of ill health (personal experience, personal or corporate memory)            Level of engagement            Understanding of what needs doing            Interested in today and tomorrow            Cares about self and co-workers</p>	<p><b><i>Differences from lower level</i></b>            Visible senior management commitment            Support            Level and quality of engagement            Knowledge            Opportunity            Reinforcement            Goals            Peer support            Also interested in the day after            Cares about business success            Accepts change as inevitable            Can visualise long term gains            Has a participative culture</p>
<p><b>Issues</b>            Individuals do not feel they will be affected            Lack of knowledge            Lack of understanding of probability            Compliance make the job harder</p>	<p><b>Issues</b>            Visibility of what is possible (you only know what you know)            Focus on the short term here and now not gradually developing conditions</p>	<p><b><i>Issues</i></b>            Not having a full appreciation of what is possible            Need for consistency of purpose</p>

<p>Inconsistent messages from management  Reward structures (piece work)  Lack of correct equipment  Task design  Lack of corporate and / or individual memory  Do not have a defined role to play  Industrial relations  Belief that safe working is inefficient  Lack of time / resource  Lives within a blame culture  Lacks initiative and/or flexibility  “Hates” change  Only interested in today  Only cares about themselves  Custom and practice behaviours</p>	<p>Ability to accurately see problem (problem definition and problem solving skills)  IT skills  Possible peer pressure  Lack of corporate and individual memory  Understanding of health risks eg level of knowledge of Asbestos vs knowledge of occupational asthma  Access to network  Interpersonal / team skills  Avoids change  Belongs to a passive/ non-inclusive culture</p>	<p>Promotion (strong advocates with the right skills often get promoted and moved out of H&amp;S)  Design  Keeping knowledge up to date  Expectations  Sudden changes (site or business)  Belongs to a participative culture  Work-life balance needs watching</p>
<p><b>Needs to get to next level</b>  Training / Education  Consistent messages from management  Frequent reinforcement of safe and health behaviour  Evidence that concerns and suggestions are taken seriously  Good task / equipment design  Methods of improving individual and corporate memory (eg storytelling)  Engagement – clearly defined focused health and safety activities  Understanding of motivation (employers ABC Analysis)  Team activities</p>	<p><b>Needs to get to next level</b>  Tools – Problem solving  - IT  - Benchmarking  - ABC analysis  - Interpersonal / team skills</p> <p>Help to see the long term  Positive engagement  Reinforcement  Consistency  Help in understanding risks  Organisation structures to provide guidance and support  Culture  Reasonable, rational and logical arguments</p>	<p><b><i>Needs to progress further</i></b>  Case studies  Competitions  Benchmarking  Corporate structure  Engagement (providing regular information for management)  IT support  Problem solving tools  Societal approval  Publicity material</p>

#### **4. Use of the matrices**

- 4.1. The employer's matrix can be used at a strategic/national level. The fact that we recognise that employers are not homogeneous in attitude means that we are better able to target resources for the group of interest.
- 4.2. Strategy or tactics can be 'tested' against the model to see if they are appropriate for the target group.
- 4.3. For an individual organisation the matrices are not a bespoke solution, but if used can be an effective planning tool and can help to provide clarity of thought. It may be for example that to get the most benefit for a particular organisation further segmentation may be required, or there may be other drivers or issues which are not mentioned, however in principal the matrix will prove to be an effective planning tool.
- 4.4. For an organisation to get the most out of the technique they should:
  - Determine which segment the company or group of employees fall into (in some cases it may be best to look at the differences from the previous level to help to clarify which segment the group or individual falls into).
  - Consider what issues are applicable in this particular case (ie what is preventing progress).
  - Consider how these may be overcome.
  - Consider which of the needs apply.
  - Consider how the motivations for that group can be used to get further engagement in relation to the needs.
  - Look at the differences from the previous level to determine how much progress has been made.
- 4.5. To illustrate how this might work for a group of employees, looking at the matrix for employees. A survey is carried out and they are found to fall into the 'not interested' segment. One of the issues preventing progress is the lack of involvement. This should be overcome by allocating specific activities, but the group are unlikely to simply accept these. The motivators for this group are examined and the possibility of using any of

these to introduce the change is considered. In this case consideration might be given to the use of rules, management drive, financial incentives etc.

## **5. Summary and considerations on further work**

- 5.1. This approach facilitates analysis of the 'segment' into which the company or group of employees falls and of the drivers, issues and needs of the subject to enable planning of intervention approaches. Using the employee and the employer matrices at the same time may help to highlight overall priorities in occupational health and safety management to support the advice that the occupational health or safety practitioner is giving.
- 5.2. Using this approach is not an immediate solution to all occupational health and safety problems, but it may be of help in selecting the right tools at the right time. The analysis could complement other approaches such as audit tools, risk assessments and health needs analysis.
- 5.3. Although this paper has focused on the Continuous Improvement Model there were a further three issues which the Continuous Improvement Programme Action Group considered to need further development:
  - 5.3.1. The mapping of possible communication routes. Although some work has now been conducted in this area, further work is needed. Critical supply chains paths should be mapped as well as the business intermediaries. The effective use of critical supply chain paths and business intermediaries can help to ensure that relevant timely information gains greater penetration into the target audience.
  - 5.3.2. Further work is required on developing the business case for occupational health and addressing the paucity of occupational health practitioners.
  - 5.3.3. Further consideration needs to be given with regard to how existing advocates can be utilised. There are upwards of 25,000 safety professionals in the UK and there are large numbers of safety representatives most of whom are willing to play a part, but they need to be effectively engaged.