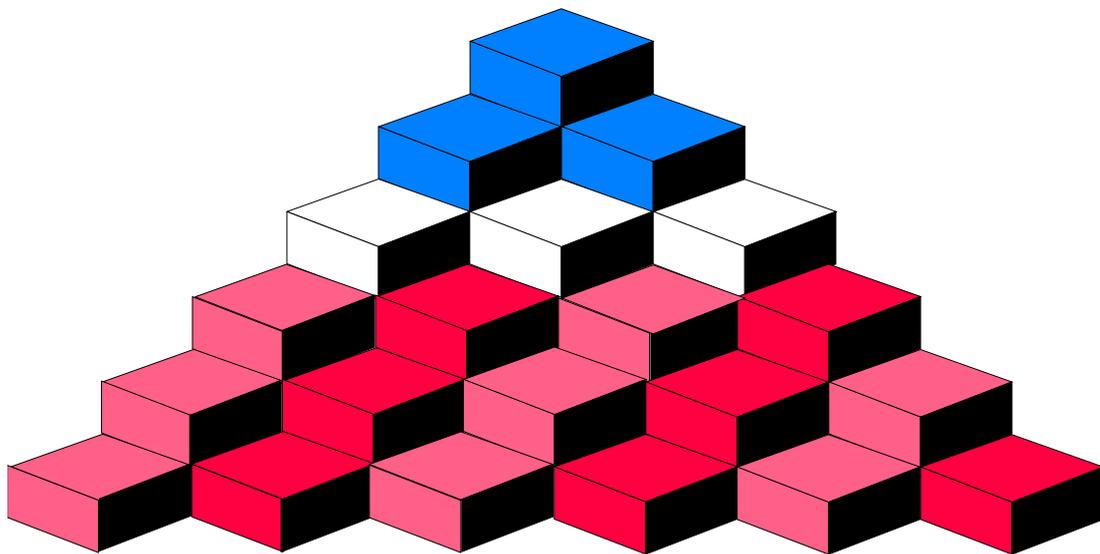


Health and Safety in HSE



ANNUAL REPORT
2009/2010

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INTRODUCTION

I am pleased to present the latest annual report on HSEs own health and safety performance. In 2009, HSE produced a three-year framework setting out key themes for development over the next three years to achieve a positive health and safety culture.

This report covers the first year of that framework, providing an overview of our annual plan, identifying our priorities and demonstrating the progress we have made to further improve HSEs health and safety performance.

Activities include, appointing a new Health and Safety Advisor, reviewing our corporate health and safety committees, implementing a new Display Screen Equipment (DSE) assessment procedure, improving our internal health and safety incident investigations; and commencing work to revise guidance to our staff.

It is also encouraging that our performance, as judged by the number of reported incidents, is significantly better than the average for comparable organisations.

A handwritten signature in black ink, appearing to read 'J. Hackitt', with a long horizontal flourish underneath.

Judith Hackitt CBE
Chair of the Health & Safety Executive

Executive summary

Health and safety in HSE

1. HSE has put in place effective management arrangements that maximise the well-being of our staff and minimise the losses resulting from ill health and injury. In line with advice to other organisations, HSE's Senior Management Team (SMT) leads on improving health and safety and monitors progress regularly.
2. In 2009, working in conjunction with safety representatives from HSEs trade unions, we produced a three-year framework setting key themes for the business to develop to achieve a positive health and safety culture.
3. This framework lays the foundation for the annual corporate health and safety plan, setting out the performance measures for the year and the priority activities which support it.

Targets

4. Set against leading and lagging indicators to reflect our key risks we have delivered successfully against some of the performance measures in the corporate plan, however we failed to achieve the targets we set ourselves for:
 - incidents resulting in injury;
 - the number of injuries due to slips and trips, and
 - to provide defensive driver training to 100% of staff which drive more than 5,000 business miles per annum
5. The total number of incidents has continued to fall. In 2009/10, 215 incidents were reported in comparison to 273 in 2008/09, a 21% reduction.

RIDDOR reportable incidents

6. We reported nine [RIDDOR](#) incidents.

Sickness Absence

7. Sickness absence remained steady throughout the year with an average of 5.70 days per employee.

Activities

8. Activities during the year included:
 - Appointing a new Health and Safety Adviser (HSA).
 - Reviewing the structure of the corporate health and safety committees.
 - Implementation of the improved Display Screen Equipment (DSE) assessment procedure.
 - Acting on the recommendations of the internal audit of our incident investigations system.
 - Incorporating health and safety management into our management training programme.

PRINCIPLES

Broad context of the health and safety policy

9. We aim to set and maintain effective standards of health and safety performance to ensure the health and safety at work of our staff and others who may be affected by our activities.

Implementation

10. The HSE policy is turned into action through our internal health and safety management arrangements:

- The main responsibility for day-to-day health and safety activity lies with line management.
- Competent advice on health and safety is provided by a professional Health and Safety Advisor (HSA).
- Human Resources Division (HRD) organise health and safety training and manage the occupational health contract.
- Health and safety is supported across the business by site safety coordinators who oversee regional activity, and local committee arrangements.

Consultation

11. Consultation with Trade Union safety representatives takes place at the Corporate Health and Safety Committee (CHSC) and the Operational Group Health and Safety Committee (OGHSC).

12. The CHSC advises HSEs SMT on the overall direction of health and safety planning.

Framework for health and safety management 2009 - 2012

13. Our framework for health and safety management aligns with our broader HSE strategy for the health and safety system as a whole. The main areas for effort are:

- The need for strong leadership, management, ownership of health and safety matters
- Creating healthier, safer workplaces by identifying risk priorities, measuring and monitoring performance

Risk priorities

14. There are three continuing priorities for action based on the number of incidents known to have occurred in HSE and on an assessment of the potential for harm to staff:

- DSE (display screen equipment) related ill health,
- Driving for work & lone working, and
- Work related stress.

Performance measures

15. Leading and lagging indicators are both used to measure performance. The Senior Management Team (SMT) reviews the lagging indicators on a monthly basis.

Annual targets:

- To have fewer than 70 reported accidents leading to injury
- To have fewer than 20 reported slip and trip related injuries
- To have fewer than 80 reported cases of work related ill health

- To have fewer than 35 reported cases of DSE related ill health
- Sickness absence – 6.2 days per staff member for the year
- Driver training – All drivers who do more than 5,000 public miles a year are up to date with their defensive driver training
- DSE assessments – At least 90% of staff are up to date with their assessments

Progress towards achieving health and safety goals

16. In the following progress report, activities undertaken throughout the year are provided in blue italics.

Strong leadership

17. Leadership, Management, Ownership

- We will demonstrate effective leadership and our commitment to the health and safety of our staff at the highest level.
- We will raise the profile of competent health and safety management and ownership.
- We will monitor our own performance effectively.
- We will actively promote a healthier environment and culture across the whole of our organisation.

When the HSA post became vacant in April 2010 we decided to strengthen the role by placing it centrally in the Deputy Chief Executives office and appointing at Band 2 level with dedicated Band 4 support. During the vacancy period temporary cover was provided by Human Resources (HR) and members of the CHSC and OGHSC until both posts were successfully filled in October 2010.

The CHSC and OGHSC continued to meet with work essential to delivery of the plan being delegated to members and non-critical development work identified and carried over to the 2010/11 work year. A list is available at [Annex 2](#).

Some examples of our corporate and regional achievements are:

Corporately

- *Acting on the recommendations of the internal audit of our incident investigations system and providing revised guidance and improved communication with our Site Safety Coordinator network.*
- *Incorporating health and safety management into our management training programme.*
- *Providing SMT with monthly performance data.*

Regionally

- *Organising regional health and safety meetings.*
- *Conducting health and safety inspections of our offices.*
- *Providing full and refresher training for fire wardens, DSE assessors / administrators, first aiders and staff who drive on official business.*
- *A number of regions have focused their activities on managing stress with Wales and the South West (WSW) in conjunction with our occupational health provider facilitating Stress Focus Sessions, the North West formulating a Stress Steering Group to take forward the actions from a divisionally organised stress training programme for managers, and the Midlands promoting local initiatives for stress awareness day, displaying posters, issuing bulletins, holding regular meetings and committing resource to the regional working group.*

Creating healthier, safer workplaces

18. Risk priorities / Measuring and monitoring

- We will profile the risks to staff and focus our efforts on following priorities.
- We will revise policies and procedures for driving at work and lone working, simplifying and making them more accessible to staff.
- We will progress work on stress at a corporate level through the Stress Working Group.
- We recognise the need to measure and monitor so that we can assess progress with corporate objectives and take corrective action to help drive the right sort of behaviours in staff and management in terms of the volume and quality of discussions on H&S between management and staff at all levels in the organisation.

HSE is committed to creating a healthier, safer workplace for all our employees and visitors to our premises. We have started work in the following areas and will continue these through to the new work year. We have:

- *Made improvements to the collation of our incident data to provide easier risk profiling and year on year comparison.*
- *Undertaken a review of our policies and internal guidance to staff and have started a programme of revision.*
- *Started a revision of our asbestos policy focusing on awareness training, accidental exposure and reporting procedures.*
- *Made progress analysing work related stress in HSE using results from the people survey and internal reports.*
- *Started consultation with DWP to establish the suitability of adopting their Wellbeing and Productivity Management (WPM) programme*
- *Successfully implemented an electronic system to deliver DSE training to all our staff. The system allows us to monitor training levels across the organisation and also incorporates a self assessment module which provides the first step in managing our DSE risk.*

The Stress Working Group (SWG) has focused its attention on improving how stress can be identified and managed within HSE to improve the health and wellbeing of employees. Membership has been re-organised to ensure that all members are able to act in a leading capacity rather than advisory in order to oversee the core work-related stress plan on behalf of CHSC.

The SWG highlights for the year, and planned activities are:

- *Successfully conducting a mapping exercise to establish what training is provided to equip managers with the skills needed to manage work-related stress effectively, which will inform future actions.*
- *Providing material for the 'Managing My Stress' course, ensuring that it is up to date and aligns with the guidance HSE promotes externally.*
- *Continuing to have regular discussions with CHSC to confirm their support and sufficient resources.*
- *Seeking confirmation from directorates that effective training and development is in place. To help achieve this, we will continue to align with people survey work streams and ensure a unified approach.*

- *Revising and updating HSE based guidance on stress readily accessible to all staff. To achieve this, a proposal has been put forward to set up a 'task and finish group' to create a dedicated resource for this work-stream.*
- *Continuing to address internal communication and accessibility of guidance and services to all staff.*

Annex 1 - PERFORMANCE

Incident and ill health statistics

19. Continuing to build on the success of the previous three year incident reduction programme, in 2009/10 we revised and set ourselves new targets. We achieved success in most of our targets, however we failed to achieve our targets for:

- incidents resulting in injury,
- injuries due to slips and trips, and
- to provide defensive driver training to 100% of staff which drive more than 5,000 business miles per annum

20. The following incident data is broken down into categories:

- a) Total number of incidents including near miss reporting
- b) RIDDOR reportable incidents
- c) Non-RIDDOR reportable incidents
- d) Performance against targets set in the corporate plan, and
- e) Sickness absence

a) Total number of incidents including near miss reporting

Table 1 – Shows the total number of incidents, including near misses over a 4-year reporting period.

Report year	Total number of incidents	Percentage decrease ⁱ
2005/06	597	Baseline
2006/07	442(23) ⁱⁱ	26%
2007/08	251(2)	58%
2008/09	255(18)	57%
2008/09	273	Baseline
2009/10	211 (4)	21%

b) RIDDOR Reportable incidents

21. There were nine RIDDOR reportable incidents, an increase of three on the previous year. Six over three-day and one for each of the following; reportable disease; dangerous occurrence and report of a dangerous gas fitting.

22. HSE's incident rate for RIDDOR reportable accidents is 212.56 per 100,000 employees. The average rate for comparable organisations (SIC 75 'Public administration and defence; compulsory social security') in 2008/09 was 873.3 per 100,000.ⁱⁱⁱ

ⁱ For the first 3-years the percentage decrease is based on the 2005/06 benchmark of 597 incidents, for 2009/10 the percentage decrease is calculated using 2008/09 as the new baseline.

ⁱⁱ Incidents in brackets occurred on HSE premises to non-HSE personnel

ⁱⁱⁱ Injury rate data by SIC for 2009/10 is available on the HSE website in November 2010.

Table 2 – Shows the total number of RIDDOR reportable incidents over a 4-year reporting period

Work year		2006/07	2007/08	2008/09	2009/10
RIDDOR	Fatal	0	0	0	0
	Major	(1)	(1)	(1)	0
	Dangerous occurrences	1	1	0	1
	Over 3 day	8(1)	3	4	6
	Ill Health	1	4	1	1
	Other	0	0	0	1 ^{iv}
RIDDOR incidents		10(2)	8(1)	5(1)	9

Table 3 – Shows the severity of RIDDOR reportable incidents by region and nature of injury for 2009/10

Severity	Region	Nature of injury
Over 3-day	Bootle	Trip
	Bootle	Musculoskeletal
	HSL	Slip
	London	Musculoskeletal
	Midlands	Slip
	YNE	Trip
Disease	ESE	Tendonitis
Dangerous Occurrence	Scotland	Failure of vehicle lift
Report of a dangerous gas fitting	ESE	Potential explosion

c) Non RIDDOR incidents

Table 4 – Shows the total number of non-RIDDOR reportable incidents over a 4-year reporting period

Work year		2006/07	2007/08	2008/09	2009/10
Non RIDDOR	Over 3 day	0	2	3 ^v	1 ^{vi}
	Ill health	92	93	72(1)	53
	Minor	82(15)	57(1)	55(12)	65(3)
	RTAs (excluding O-3 day)	-	26	27	22
	All other	258(6)	65	92(5)	61(1)
Non-RIDDOR incidents		432(21)	243(1)	249(18)	202(4)

^{iv} Report of a dangerous gas fitting

^v Two road traffic incidents and one reoccurring musculoskeletal condition

^{vi} Road traffic incident

d) Performance against targets set in the corporate plan

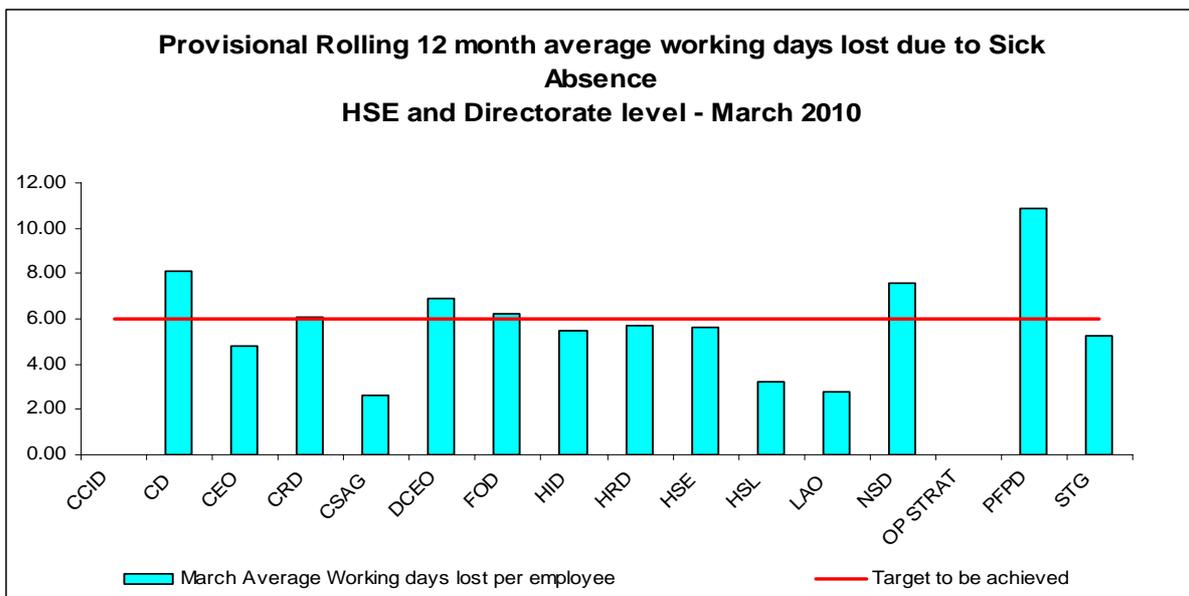
Table 5 – Shows the performance against target for 2009/10

Category	Target	Actual
All incidents causing injury	<70	82
Slips/trips causing injury	<20	22
All work related ill health	<80	54
DSE ill health	<35	14
Sickness absence (days per employee)	<6.2	5.70
All drivers who do >5000 public miles per year are up to date with their safe driver training	100%	83%
At least 90% of staff are up to date with their DSE assessment	90%	93%

e) Sickness absence

23. A total of 24,266 working days were reported lost in HSE through sickness absence, a 10% reduction on the 27,031 days reported last year, giving an average rate of 5.70 per member of staff for 2009/10.

Chart 1 – Shows the provisional 12-month average working days lost due to sickness absence for 2009/10^{vii}



^{vii} Due to internal structural changes rolling 12-month data is not currently available for CCID and OPSTRAT

Annex 2 - TARGETS FOR 2010/11

HSE has produced a new 'Corporate Plan for health and safety 2010/11' which continues to be based on the ['Framework for health and safety management 2009 - 2012'](#).

The corporate plan contains the following set of proposed performance measures which are currently under consultation:

1. To have fewer than 70 incidents leading to injury, excluding slips and trips and work related road traffic injuries
2. To have fewer than 20 slip and trip incidents leading to injury
3. To have fewer than 15 work related road traffic injuries
4. To have fewer than 50 cases of work related ill health, excluding DSE
5. To have fewer than 10 cases of DSE related ill health
6. To have fewer than 6.2 days of sickness absence per staff member for the year
7. At least 90% of staff have completed their DSE training and self assessments
8. At least 90% of high risk user action reports are actioned by an assessor within 4 weeks of user assessment
9. At least 90% of all absences due to work related stress are reported through the IH1 system and appropriate action taken
10. At least 10% of calendar entries and who's who entries are randomly checked to ensure the contact information and location details are correct
11. At least 90% of drivers who travel by car on official business are up to date with their defensive driver training

Actions carried forward from the 2009/10 corporate plan

- We will actively promote a healthier environment and culture across the whole of our organisation.
- We will profile the risks to staff and focus our efforts on following priorities.
- We will revise policies and procedures for both road risk and lone working, simplifying and making them more accessible to staff.
- We will progress work on stress at a corporate level through the Stress Working Group.
- We recognise the need to measure and monitor so that we can assess progress with corporate objectives and take corrective action and help drive the right sort of behaviours in staff and management in terms of the volume and quality of discussions on H&S between management and staff at all levels in the organisation.