



# **An evaluation of the Safety Information Centre approach in providing health and safety advice to small firms**

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for the Health and Safety Executive

**CONTRACT RESEARCH REPORT**  
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# **An Evaluation of the Safety Information Centre Approach in Providing Health and Safety Advice to Small Firms 4076/R62.087**

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The study investigates the effectiveness of an approach presently in use at two RoSPA-affiliated Safety Information Centres designed to help small businesses to set up and operate a simple health and safety management system. The approach is based on the introduction of a health and safety policy and on the assessment of occupational risk and the development of appropriate control measures. The intervention is brief and makes extensive use of self-help. The investigation is based on assessments performed during follow up visits to 24 companies that had previously received help from one of the two Safety Information Centres. The assessment consisted of interview, inspection of premises, document examination and assessment of training and maintenance standards.

It was found that the Safety Information Centre approach was effective in the majority of cases in helping business managers to produce adequate risk assessments and policy statements and to introduce an effective health and safety management system into the work place. It was noted that many of the necessary arrangements had been in place prior to the Information Centre intervention, and the possible reasons for this are discussed. It is suggested that the intervention has, in some cases, been effective in bringing these diverse arrangements together and in augmenting them in order to produce a coherent system. There is evidence that it has also developed the necessary knowledge and confidence in the business manager to maintain and develop the system. The limitations of the approach are discussed, as are the circumstances under which it can best be employed.

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The authors would like to acknowledge the most valuable contribution made to this study by John Frith who performed the company assessments and made a number of helpful comments and suggestions. We would also like to thank the companies that participated in the research.

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## **Executive Summary**

This report describes a project that assesses an intervention designed to help small businesses establish and operate a simple health and safety management system. Two RoSPA-affiliated Safety Information Centres operate the intervention. It is based on the introduction of a health and safety policy statement and on a risk assessment. The details of the approach are outlined in the results.

The project took the form of assessment of the health and safety management systems of 24 companies that had been assisted by means of this intervention within the last two years. The assessments were carried out February –June 2000.

### **The findings**

The research presents evidence to suggest that:

- Although many of the small firms had a large number of adequate health and safety arrangements in place prior to intervention, they needed help with preparing a policy statement and carrying out a risk assessment;
- The intervention appears to operate successfully at two levels;
  - At a very practical level of enabling small firms to write a policy statement and to carry out a risk assessment. This can also lead to practical improvements; and
  - In developing a more coherent understanding of health and safety management;
- The success is based on providing the necessary knowledge, building confidence and presenting health and safety management as an integral part of general management.

It is suggested the principles of this approach could be used to help standardise advice given by other Safety Information Centres. The principles could also be used to encourage health and safety consultants to provide appropriate advice to small firms.

# CHAPTER 1

## INTRODUCTION AND PROJECT RATIONALE

The number of small businesses in the UK has increased greatly in the last decade or so [1]. This change has in its turn enhanced the importance of intermediary organisations in helping small businesses to set up and maintain their health and safety management systems [2]. These intermediaries include Chambers of Commerce, Learning and Skills Councils, Trade and Professional Associations, Health and Safety Consultants and 'Good Neighbours' [3]. The intermediaries offer a range of approaches in assisting small firms. These approaches include provision of information and advice, training courses, and in some cases taking over the health and safety activities on behalf of the small firm. Little is known about their effectiveness, but there is anecdotal evidence to suggest that the small business manager is left in some cases with the impression that health and safety management is bureaucratic, legalistic and costly to introduce.

This study is designed to evaluate the effectiveness of a 'minimalist' approach in the provision of information and advice developed by two of the fifteen Safety Information Centres that are operated through the RoSPA-affiliated Health and Safety Groups in the UK [4]. These two Centres provide assistance at a very basic level, explaining how a simple health and safety management system can be set up, taking the health and safety policy statement and a risk assessment as a basis. The HSE documents 'Five Steps to Successful Health and Safety Management' [5], 'Stating your Business. Guidance on Preparing a Health and Safety Policy Document for Small Firms' [6] and '5 Steps to risk assessment' [7] form the framework for the approach. Following the intervention the small business manager is left to complete the documentation and to introduce the associated measures into the workplace.

A published telephone survey conducted by Loughborough University gauged the reactions of over 30 small business managers who had sought help at the two Centres [8]. This survey indicated a generally positive response to the service provided. Almost all the managers reported that they had succeeded in completing their health and safety documentation and had introduced the associated management regime. Most considered that the effort had been worthwhile, had not been costly and had been helpful in strengthening their management system.

This is a complementary study that aims to identify the health and safety measures actually introduced as a result of the intervention, measure the quality of health and safety management system resulting, and examine the strengths and weaknesses of the approach developed by the Safety Information Centres.

The results from the research may be of use in a number of ways, for example:

- To set a base line for what is required to instruct and motivate managers of small businesses to set up and operate a health and safety system of acceptable standard.
- To provide guidelines for use by intermediaries in providing effective training, information and advice to small businesses at minimum cost.

- To clarify the role and standardize the performance of the fifteen Safety Information Centres, as they have varying approaches to giving health and safety information and advice. This in its turn should increase the confidence of those referring small business managers to the Centres or to other organisations run on similar lines.

## **AIMS OF THE STUDY**

The aim of the study was to evaluate the effectiveness of the Safety Information Centre approach in improving health and safety management in 24<sup>1</sup> mainly small businesses that had been assisted by one of two Safety Information Centres. This was achieved by carrying out an audit that:

- Identified the actual changes that were made at each business in health and safety provision as a result of the intervention (interview);
- Assessed the quality of the health and safety management system set-up in workplace (documentary evidence); and
- Assessed how effectively the management system has been introduced and used in the workplace (observation and interview).

## **OUTPUTS FROM THE STUDY**

The results from this research include:

- A clear description of the Safety Information Centre approach;
- A summary of the assessments and an analysis of the strengths, weaknesses and potential value of this approach; and
- The individual assessments presented as a series of case studies.

## **METHODOLOGY**

The project was carried out in five stages:

1. Documenting the Safety Information Centre approach;
2. Establishing the assessment protocol to evaluate the approach;
3. Selecting and contacting the small businesses;
4. Performing the assessment interviews; and
5. Analysing the assessment data and preparing the report.

These stages are detailed below:

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<sup>1</sup> Government survey control restrictions applied

## **Documenting the Safety Information Centre approach**

The research focused on the small businesses that had used the same two Safety Information Centres involved in the earlier study [8]. The two Centres are located in the North West of England. Details of their approach in assisting companies set up a health and safety management system were obtained by means of discussions with key staff in the two Centres. The information was recorded.

### **Stage 2      Establishing the assessment protocol**

The aim of the second stage of the project was to establish an appropriate assessment protocol that identified where changes and improvements had taken place as a result of the intervention. To ensure complete impartiality the assessments were undertaken by Mr. John Frith, a retired HSE Inspector who has had extensive experience of inspecting small companies in the industrial sectors involved.

#### **Proforma development**

A proforma was developed in collaboration with Mr. Frith. The proforma included a number of checklists that were designed to aid recall by the owners or managers to help them distinguish between those features that were already in place and those that had been introduced or improved as a result of their interaction with the Safety Information Centre. The complete proforma was composed of the following sections:

- Demographic information
- Assessment of the health and safety management system
  - Policy Statement
  - Risk Assessment
  - Documentation
  - Training
  - Maintenance
- Other information including premises and welfare facilities

Completion of the proforma was achieved through interview with the owner or manager, observation of documentation and visual inspection of the workplace. The standards for assessment were broadly based on those set by the HSE publications already mentioned [5-7] together with 'An Introduction to Health and Safety' [9] and '5 Steps to Risk Assessment, Case Studies' [10] in conjunction with the assessor's experience as an HSE inspector.

#### **Pilot study**

The proforma was piloted against four assessments and as a result a number of minor modifications were made. The proforma is presented in appendix 1.

### **Stage 3      Selecting and contacting small businesses**

The aim of stage 3 of the project was to gain agreement from 24 businesses to participate in the research. Initial contact was made by telephone with businesses that had received help from the Safety Information Centres within not less than 6 months and not more than two years from the time of the assessment visit. The lower time limit was to allow reasonable time for the new health

and safety regime to have been set up and introduced at each business. The upper limit was designed to ensure reasonable recall by those interviewed.

To encourage businesses to participate, it was explained that the assessment visit would provide an opportunity for them to obtain a review of their health and safety management system and that any concerns or queries that they might have would also be dealt with.

### **The sample population**

The nature of the study population will have been influenced by two significant factors:

- Willingness of companies to participate in the research; and
- The route of contact with the Safety Information Centre

### **Companies unwilling/unable to participate**

Companies contacted were chosen from the records of the two Safety Information Centres with a view to covering a broad range of occupations and associated workplace hazards. In all, 42 companies were approached. Table 1 illustrates the reasons why a number were unable or unwilling to participate. Three companies had ceased trading, and at six companies the manager involved in the contact with the Safety Information Centre had left the organisation. Potentially of more significance, in 9 cases the manager did not wish to be interviewed or was unavailable. Of these, there were simple explanations in 3 cases. In one they had recently received an inspection visit with favourable results, so considered the assessor’s visit unnecessary. In the second case the manager felt that their health and safety standards were high and that a visit would not help them significantly. The third one was in the process of changing premises. The remaining 6 were either repeatedly ‘unavailable’ or simply said that they were not interested. Their motives, and thus the bias that their absence might give to the sample of companies, is difficult to assess. The numbers involved are not large, but the possible effects on the population studied should be kept in mind.

**Table 1  
Breakdown of companies contacted**

<b>Reasons for non/participation</b>	<b>No. of companies</b>
Company agreed to participate	24
Manager not willing to be interviewed/ contacted	9
Manager involved with intervention had moved on	6
Company closed since intervention	3
Total number of companies approached	42

### **Routes of contact with the Safety Information Centre**

In the majority of cases a small firm contacts a Safety Information Centre following a referral from another intermediary organisation. Less commonly companies contact a Safety Information Centre directly having seen publicity or spoken to colleagues. Table 2 illustrates the referral sources and the number of firms in the sample coming through these routes.

**Table 2**  
**Reason for contacting the Safety Information Centre**

<b>Reason</b>	<b>No. of firms</b>
HSE Workplace Contact Officer	12
Business Link Advisor	6
Publicity/ personal recommendation	4
HSE Inspector	1
LA Environmental Health Officer	1

The main sources of referral can be seen from Table 2 to be Business Link Advisors and Workplace Contact Officers (WCO). WCO are HSE employees whose function is to make initial contact with new companies to ensure the companies register with their enforcing authority and to provide them with basic health and safety information. It has not been possible to discuss referral criteria with all those involved. However just over half the referrals were made by two individuals – a WCO and a business advisor at a Business Link. Their criteria for referral of a small firm to the Safety Information Centre were as follows:

The business advisor at a Business Link (6 referrals) used a checklist of points to discuss with business managers. Most of these were not related to health and safety, but he had risk assessment on the list, and recommended contact with the Centre to those who had not completed one. Requests for help from business managers were rare but uptake of the recommendation was high.

Nine referrals came from one Workplace Contact Officer. He found typically that about half the small businesses he visited lacked, or had incomplete health and safety documentation. These would be given a selection of HSE booklets and would be asked if they were interested in being put in contact with the Safety Information Centre. About half of these, 25% of all companies visited would show little enthusiasm for further improvement. The remainder would show interest but would be divided between those thinking that they could make progress using the HSE documents, those claiming that they would contact a health and safety consultant, and those wishing to make use of the Centre. The referral rate from the WCO is consistent with an approximate 10% uptake from the WCO's normal workload, in reasonable agreement with the above estimates.

The 4 business managers seeking help as a result of publicity or personal recommendation (Table 2) may have an above average motivation to improve their health and safety management. In addition, a further 5 business managers claimed to have taken the initiative in seeking help through the local Business Link or during a WCO visit. It is not clear whether this was always so – discussions with the business advisor and the WCO suggest that in their experience, the initiative seldom comes from the business manager.

This selection process for referral is far from simple. In the authors' opinion, some bias favouring the selection of managers with an above average motivation to improve their health and safety standards cannot be ruled out.

#### **Stage 4      Performing the assessment interviews**

The assessments took place between February and July 2000. The assessor took care to arrange the visits for the maximum convenience of the business managers. The interviews took place with the person who had been directly involved with the Safety Information Centre. The visits were between one and two hours in length. They typically started with an office-based session used to gather information about the company and its management, and to elicit the manager's general comments on the service provided by the Safety Information Centre. This was followed by a tour of the premises. Any serious health and safety deficiencies that were observed were pointed out and discussed at the time. Lesser matters were noted and brought up later. On return to the office, documentation was examined and assessed. Subsequent discussions included matters arising both from the tour and from the documentation. Attitudes were found in general to be positive – managers appeared to be receptive to comments, and frequently raised additional points over which they had concerns. These were discussed and solutions were found wherever possible.

#### **Stage 5      Data analysis and report preparation**

The data, based on the assessment were recorded, collated and analysed. A summary of the findings is presented in chapter 2 of this report. Case studies of the companies assessed are found in Appendix 2.

## **CHAPTER 2**

### **SUMMARY OF FINDINGS**

The information gathered has been presented under the following headings:

- The Safety Information Centre approach
- Demographic information of the participating organisations
- The presence and adequacy of the
  - Health and safety policy statement
  - Risk assessment
- The presence and adequacy of other health and safety features
  - Documentation
  - Training standards
  - Maintenance standards
  - Premises and welfare facilities
- Other information

### **THE SAFETY INFORMATION CENTRE APPROACH TO PROVIDING INFORMATION AND ADVICE**

The approach is described in terms of the underpinning philosophy and the practical steps.

#### **The underpinning philosophy**

The aim of the Safety Information Centre approach is to ‘kickstart’ a small firm by providing both the motivation and the basic information and advice that enables the firm to establish a simple but effective health and safety management system. It is left to the manager to complete the documentation and actually introduce appropriate measures. The key building blocks are preparing a policy statement and carrying out risk assessment. Information to support this approach and the general methodology adopted are to be found in the following HSE documents:

- ‘Five Steps to Successful Health and Safety Management’ [5]
- ‘Stating Your Business. Guidance on Preparing a Health and Safety Policy Document for Small Firms’ [6]
- ‘5 Steps to risk assessment’ [7]
- ‘An Introduction to Health and Safety’ [9]
- ‘5 Steps to Risk Assessment, Case Studies’ [10]

#### **Practical aspects**

The two Centres used in this study operate along broadly similar lines when dealing with referrals or requests for assistance with establishing a health and safety management system. However one Centre, designated Centre 1, provides a site visit to each company whilst the other, Centre 2, is office based.

Interviews typically last an hour to an hour and a half. Some idea of the strategy for the interview, which will inevitably vary from occasion to occasion, can be obtained from the following summary.

- **Gather information**  
At the start of the meeting, talk to the manager in order to find out about the company, its activities and the present health and safety arrangements, also to assess the background and attitudes of the manager.
- **Health and safety an integral part of management**  
Present health and safety management as an integral component of management in general, and explain that health and safety can be effectively managed in a straightforward non-bureaucratic way.
- **Describe positive motivators**  
Develop the manager's motivation using positive motivators – reduced lost time and overhead costs, improved quality control and productivity and an enhanced company image and ability to win contracts. Avoid negative motivators such as risk of prosecution and need for compliance with Regulations.
- **Based on policy statement and risk assessment**  
Present a simple management scheme based on the assessment of workplace risks and on a statement of policy as regards health and safety, using the HSE documents as a basis.
- **Assist with hazard identification and control measure selection**  
Give help in identifying hazards to be included in the risk assessment and suggest appropriate control measures, leaving the manager to make final decisions. Help the manager to allocate health and safety responsibilities in the policy statement.
- **Involve staff**  
Stress the importance of involving staff at all stages of development and introduction of the new health and safety management system.
- **The need for documentation**  
Point out the continuing uses of the documentation in staff training and in tendering, and the need to keep the documents up dated.
- **Sources of help**  
The final step is to provide details of further sources of information. This is particularly important where significant hazards and risks are being encountered.

A significant part of the time is spent in motivating the business manager and in presenting health and safety management as an integral part of management in general. Risk assessment may be introduced using a few common hazards such as fire and slips, trips and falls as examples. Other hazards are identified at Centre 1 during a site tour, at Centre 2, in the course of discussions. Production of a policy statement appears to afford little difficulty to most managers, but help is often needed in ensuring that responsibilities are distributed amongst employees rather than all being left to a single person.

The service is provided free of charge.

## **DEMOGRAPHIC INFORMATION OF THE COMPANIES ASSESSED**

### **Company details**

Details of company activity, those interviewed, company size and year established are presented in table 3. This illustrates that a wide range of work activity and sectors were included. A range of staff were involved in the interviews, particularly the Managing Director. The majority of

companies employed less than 50 people, with two exceptions. The participating companies represent not only those that are newly established, but others that have been in operation over a number of decades.

**Table 3**  
**Company activity and size**

<b>Case study</b>	<b>Company Activity</b>	<b>Person interviewed</b>	<b>No. of employees</b>	<b>Year established</b>
1	Edible oil process/supply		9	1998
	Conveyor belt manufacture	Production Manager		1964
3		Production Manager	12	
4	Control cable manufacture		10	1993
	DIY wholesale	Customer Care Manager		1970
6		Technical Manager	32	
7	Press-tool manufacture		12	1974
	Food equipment manufacture	Managing Director		1986
9		Managing Director	12	
10	Sewer & drain maintenance		300	1993
	Outdoor activity Centre	Education Manager		1997
12		Office Manager	12	
13	Motor vehicle repairs		5	1982
	Haulage/parcel delivery	Managing Director		1997
15		Partner	4	
16	Firm of solicitors		36	1972
	Community transport charity	Manager		1987
18		Managing Director	6	
19	Manufacture UPVC windows		10	1990
	Precision engineers	Managing Director		1951
21		Managing Director	5	
22	Kitchen unit manufacture		9	1995
	Recreation and social club	Club Secretary		1995
24		Owner	4	

### **Quality standards**

The managers were asked if the organisation operated to any quality standards. Six were found to

### **PRESENCE AND ADEQUACY OF THE POLICY STATEMENT AND RISK ASSESSMENT**

of success in assisting firms develop adequate policy statements and risk assessments.

### **Policy statement**

following the Safety Information Centre intervention. The assessor found that the documents produced varied in length from firm to firm, but the majority of policy statements covered 2-4 sides

adequate for the type of business activities. In a small number of cases the policy statement was not it was either incomplete or required updating.

**Table 4**

<b>Item</b>	<b>No. of</b>	<b>No. assessed as adequate</b>	<b>inadequate</b>	
<b>H&amp;S policy</b>	First introduced at SIC intervention		9	2
	intervention	6		1
	Present but not intervention	7		1
<b>Risk</b>	First introduced at SIC intervention		16	3
	intervention	1		0
	Present but not intervention	4		1

### **Risk Assessment**

out of the 24 companies developed or improved their risk assessment following the assistance from the Safety Information Centre. Seventeen of the risk assessments were assessed as adequate, whilst

because the assessment had not been fully completed. Risk assessments were typically found to occupy 1-3 sides of A4 paper.

with that found in the earlier telephone study [8] (28 out of 32), although in that study no assessment was made of adequacy. It is notable that follow-up visits might well have resolved most

It is worth noting that in a small number of cases, the policy statement and/or the risk assessment had subsequently been examined by insurance companies or enforcement officers. This may well

### **PRESENCE AND ADEQUACY OF OTHER HEALTH AND SAFETY FEATURES**

An overall view of health and safety management within the participating organisations was documentation, training standards and maintenance standards. Tables 5-7 present the results of this stage of the assessment.

## Documentation

In addition to the policy statement and risk assessment, key health and safety documents, that are legally required, were assessed.

**Table 5**  
**Presence and adequacy of health and safety documentation in participating organisations**

Item	No. present before intervention*	No. added or improved as result*	No. assessed as adequate*
Accident book		3	24
	21	3	
Training records	19		22
Maintenance of fire	22	0	
Maintenance of portable electrical equipment		1	15
	3		3
compressor and vehicle lift			

\* Based on number of companies

Information Centre intervention. In addition a high proportion of the documentation was assessed as adequate. Nearly 50% of the companies (11) maintain their fire equipment by contract, whilst a specific equipment – cranes, air compressor and vehicle lift are usually part of the insurance company reports. In two cases the training records were associated with the presence of ISO 9000 with the testing of portable electrical equipment (6 cases) and training (5 cases). The earlier telephone study [8] produced a similar though less precise result for the number of health and safety improvements following the intervention included introduction of an accident book and first aid book and improvements in training records.

**Table 6**  
**Presence and adequacy of health and safety training in participating organisations**

	No. present before intervention*	improved as result*	No. assessed as
Induction	19	3	20
	14	4	
First aid	22		23
DSE		2	7
	7	0	
COSHH	16		15
Noise	5		4
PPE		2	14
	1	0	

\* Based on number of companies. Number varies depending on particular requirements of the organisations.

Table 6 illustrates that the majority of health and safety training provided by the participating firms was in-place before the Safety Information Centre intervention. The assessor found that many of the businesses had simple but adequate training measures in place. Reference to Table 6 indicates that Safety Information Centre advice led to some improvement in training in some cases, particularly manual handling, DSE, COSHH and PPE.

In a small number of cases the training was assessed as inadequate for a range of reasons that include inadequate information provided for the employees on the use of PPE, and inadequate training on use of DSE. In some instances, for example use of lift truck and use of excavators, the training was required by the enforcement agencies or insurance companies. Sources of training mentioned included Local Authorities, suppliers of goods, chemicals and equipment and commercial training organisations as well as internal trainers. The training would not always be of a formal nature and could include informal discussion and use of literature from the suppliers. Induction training might be quite brief and informal, while in a workplace with only low handling risks, manual handling training might consist of instruction to use wheeled handling aids when possible and to obtain help with difficult loads.

### Maintenance standards

Table 7

<b>Presence and adequacy of equipment maintenance in participating organisations</b>			
Item	No. present before intervention*	No. added or improved as result*	No. assessed as adequate*
Lifting equipment	6	1	6
Lift trucks	9	1	9
Pressure systems	12	1	12
PPE	14	0	13
Installed equipment	3	0	3
Other – extraction equipment	1	0	0

\* Based on number of companies. Number varies depending on particular requirements of the organisations.

Table 7 illustrates that maintenance was in general assessed as being to a high standard. In the majority of cases the maintenance measures were in place before the Safety Information Centre intervention. The role of insurance companies in inspecting equipment such as lift trucks, pressure systems, lifting equipment and boilers is significant in ensuring adequate levels of maintenance. Maintenance was identified as inadequate in 2 cases where ventilation equipment had not been cleaned and where replaceable parts of PPE had not been replaced. Fire equipment and portable electrical equipment are not present on the maintenance checklist as they are included by implication in the earlier ‘documentation’ list.

## **OTHER INFORMATION**

### **Premises and Welfare facilities**

standards in housekeeping, welfare and building maintenance in over 90% of the premises visited. A number of organisations were operating from new premises where provision of facilities and appreciation of welfare requirements and a demonstration of pride in ownership of the premises.

### **Visits from the enforcement agencies**

outcome of such visit(s) had been.

Twelve of the companies had been visited one or more times by the HSE or the Local Authority in complaints or as a part of sector specific inspection programmes and routine inspections. The outcomes varied from no action to a number of recommendations and requirements. In some assessment and policy formulation.

## CHAPTER 3

### DISCUSSION

The results indicate that the ‘minimalist’ Safety Information Centre approach, applied to the particular population of companies being studied, produced a high degree of success in helping these businesses to develop health and safety policy statements and risk assessments to a standard which was acceptable to the assessor. Beyond the achievement of compliance with the legal requirements for such documents, the value of the intervention needs to be considered.

In a limited number of cases additional improvements were made to the health and safety management system as a result of the intervention for example additional training and improved record keeping. However, evidence on other aspects of health and safety management demonstrates that many of the arrangements necessary for the implementation of the policy statement appear to have been in place at many businesses before the Safety Information Centre intervention. Similarly a large number of control measures required by the risk assessments had already been introduced prior to the intervention. This is a significant observation although the evidence needs to be interpreted with care. The information is based on the recollections of the business managers, and may not be totally accurate. For example, a particular matter might well have arisen during the Safety Information Centre intervention, been discussed in an informal atmosphere and subsequently acted on by the manager without the realization that action had been triggered by the intervention. Safety Information Centre visit notes do not in general record such detail, but in a few instances specific mention has been found of the absence of a feature that was subsequently claimed by the manager to have been in place before the intervention.

The presence of such basic features of health and safety management as the accident book, first aid provision, health and safety training and simple risk control systems could perhaps be attributed to a number of influences. The study has highlighted some of these that include:

- **Previous experience of the owners.** Many small businesses are set up by managers with previous experience of working in larger companies, where they will have learnt some aspects of health and safety management, particularly those related to the technical aspects of the work.
- **Advice from other intermediaries.** Visiting inspectors, including HSE, LA Environmental Health Officers, Fire Inspectors may well have provided advice, as may have the business advisors or Workplace Contact Officers referring the companies to the Safety Information Centre. The WCOs normally leave a pack of HSE brochures to help the business manager to get started.
- **Role of insurance companies.** Many instances of insurance company influence were noted by the assessor. These included pressure system maintenance, lift truck training and maintenance and lifting equipment testing and inspection. Insurance company influence appears to be positive and effective – there were almost no assessments of inadequacy in these areas.

- **Role of suppliers.** Suppliers were mentioned several times as being influential, particularly in the context of COSHH assessment and use of PPE.
- **Companies working to quality standards.** Six companies were working with ISO 9000 where there is some overlap with health and safety management particularly in the areas of training and record keeping.
- **Informed by parent company.** In one case information was supplied by the parent company.
- **Required by clients.** A number of companies were suppliers or contractors to larger organisations. These organisations had a number of health and safety requirements of the small firms.

In addition, as discussed in the methodology, the sample of companies may be biased to those with managers who have above average awareness of health and safety.

These influences may have had some effect on the production of the policy statement and risk assessment. However the production of these documents can obviously create particular difficulties for the small business manager. The procedures are not prescriptive in nature, and a considerable degree of judgement is required. This is especially the case in performing a risk assessment, in deciding which hazards are to be included and what control measures are appropriate in each case. It is in these circumstances that more specific help is needed. The comments made by the business managers on the benefits of the intervention demonstrate this. These are summarised in Table 8.

**Table 8**  
**Comments on the SIC intervention made by business managers**

Comment	No. of mentions
Helpful or useful	19
Gave basic outline on how to carry out a risk assessment	11
Made confident to prepare risk assessment	6
Gave confidence or reassurance on risk assessment	4
Helped to develop policy statement	3
Helped fine tune and confirm documentation	2
Good for hazard identification	2
Personal approach particularly helpful	2

A number of those interviewed made specific comments which illustrate this further, for example, 'made health and safety less forbidding', 'many health and safety documents are difficult to interpret', 'now confident to do more', 'the risk assessment has stood the test of time', and 'safer than approaching an enforcement officer'.

This information would suggest that the intervention is successful at a very practical level of enabling the managers to develop the understanding and skills to write a policy statement and carry out a risk assessment. It is notable that a large proportion of the companies assessed found the intervention 'helpful' or 'useful'. Those that did not are discussed individually later. The positive attitude is possibly partly prompted by the advice being provided free of charge. Other comments are perhaps of more significance. It is apparent that the intervention was confidence building for

some of the business managers – terms like ‘confident’, ‘confidence’, ‘confirm’, ‘less forbidding’ and ‘reassurance’ are to be found. Since the intervention a number of the businesses have gone on to carry out further risk assessments when required. Two managers also specifically mentioned that the personal approach was helpful. These comments reflect the goal setting nature of risk assessment and the need for interpretive assistance in developing an appreciation of the topic.

It is suggested that the intervention also enables the business manager to develop a greater appreciation of health and safety in the context of a management system rather than as a number of empirical individual elements. The assessor made a range of comments in his visit reports that provide insight into this aspect of the Safety Information Centre intervention. These included:

- Improved health and safety awareness;
- Increased awareness of risks;
- Helped manager coordinate efforts;
- Earlier visit could have saved resources; and
- Subsequently produced other risk assessments.

The intervention thus appears to lead to a more coherent understanding of how health and safety should be managed. It could also be argued that once learnt, the skills of carrying out a risk assessment which lead to judgements and decision-making, encourage ownership of health and safety.

### **The less successful interventions**

The Safety Information Centre approach does have a number of limitations that have been highlighted by the less successful interventions. The assessor identified three companies that did not benefit from the assistance provided by the Safety Information Centre. The key points from these assessments are presented below.

Case study 2, an engineering company with 30 employees. They were referred by a visiting HSE Inspector. They already had policy statement and risk assessment documents and claimed that the ‘not very practical’ Safety Information Centre intervention had not improved their health and safety system. The assessor found that they had failed to identify some major hazards associated with toxic materials. These should have been abundantly apparent to management. The assessor reported that ‘the problem almost certainly originates at top management level. Not enough involvement or understanding’. The Safety Information Centre approach, with its encouragement of self-help, will tend to be vulnerable to this type of management shortcoming.

Case study 10, a relatively large company employing around 300 staff, undertaking sewer and drain maintenance work. They employed their own Health and Safety Manager who had a detailed health and safety management system in place. They sought help from the Safety Information Centre following 4 HSE inspection visits associated with accidents. A company of this size, working in a relatively high risk field, and having its own health and safety staff, is most unlikely to gain much from spending an hour or so talking to Safety Information Centre staff. Indeed, the safety manager claimed to have gained no benefits at all from the meeting.

Case study 21, an electronics company with 5 employees was referred to the Safety Information Centre by a WCO. The Managing Director had ‘long and varied’ experience in the electronics industry, but was ‘perhaps a little casual’ over health and safety matters. This was reflected in the fact that he had failed to produce a policy statement and risk assessment many months after the

Safety Information Centre intervention, and had 'probably gained less than any other' from the attitudes.

### **Summary**

impressive, provide an indication of the strengths and weaknesses of the Safety Information Centre approach. These include:

- - 
    - 
    -
  - 
  - 
  - 
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  - 
  -
- of their management systems.

### **Weaknesses of the approach**

The approach is more suitable for small businesses than for larger ones, which often have procedures;

- Based on a single visit/intervention – follow-up meetings would be beneficial;
  - Limited by the self-help concept - motivational issues of managers may not be successfully addressed; and
- A limited number of small firms access the Safety Information

### **Application of the approach**

Care is needed in generalising the success of the approach taken by the two Centres studied.

A standardisation of approach across all RoSPA- affiliated Safety Information Centres.

businesses. To be successful it would require supplementary training for the consultants, aimed at changing both attitudes and approach in dealing with small businesses. How this might be done has

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**APPENDIX 1**

**Evaluation of the Safety Information Centre approach in providing health and safety advice to small firms**

**Questionnaire for firms who participated**

Year business established
Contact Name
Job title
Does the company work to any quality standards?
When did you contact the SIC (approx.)?
Why/how did you contact the SIC?
Have you any comments on the assistance they provided? What were the benefits? ( <i>Specific as possible, please</i> )
Have you been visited by a health and safety inspector? No. of times, outcomes?

## Assessment of health and safety management system

### Documentation.

Item	Present before intervention?	Added/improved as a result	Is this necessary?	Assessed as adequate?	Why, how Comments
H&S Policy Statement					
Risk Assessment					
Accident book					
First aid book					
Training records					
Fire equipment Maintenance					
Portable elec. equip. maintenance					
Other – specify					

### Training

Item	Present before intervention?	Added/improved as a result	Is this necessary?	Assessed as adequate?	How, why comments
Induction					
Manual handling					
First aid					
Display screen equipment					
Lift trucks					
COSHH					
Vibration					

Noise					
PPE					
Other – specify					

**Maintenance**

Item	Present before intervention?	Added/improved as a result?	Is this necessary?	Assessed as adequate?	How, why comments
Lifting equipment					
Lift trucks					
Pressure systems					
PPE					
Installed equipment					
Other – specify					

**Other information**

Premises and welfare facilities
Adequacy of the risk assessment?
Other comments

## **APPENDIX 2**

### **CASE STUDY 1**

#### **Background**

A small company based in the Liverpool docks working in the food processing industry. The company was established in summer of 1998 and at present has 9 employees. The main activity is the bulk purification of edible oil by the use of centrifuge and filters.

The company plans to extend its business activities to include the production of animal feed. At the time of the visit new plant was being installed and as a result, most of the work was being carried out by outside contractors.

A Workplace Contact Officer visited the company not long after it was established. The Managing Director was unfamiliar with UK legislation and so the WCO suggested that the local Safety Information Centre could provide health and safety advice.

The Safety Information Centre visited the company 18 months ago. The assistance provided was considered extremely useful, particularly in the development of both policy statement and risk assessment. The Safety Information Centre advisor provided a basic outline of how to write a policy and carry out a risk assessment that was helpful and sufficient for the company to get started.

#### **Assessment of the health and safety management system**

An assessment of the management systems illustrated that as a result of the intervention several aspects of the health and safety management system had been established. These included the production of a health and safety policy statement, development of risk assessment, provision and use of an accident book and first aid book, and the development of training records. The risk assessments were considered adequate for the present work activity but will need revising to allow for the extension of premises and processes.

Although the company carried out some training e.g. FLT, first aid, the intervention also increased the amount of training in particular for manual handling and use of PPE.

The company already had a number of adequate measures in-place related to maintenance of equipment such as lift trucks, lifting equipment and pressure systems. This was required by the insurance.

#### **Premises and welfare facilities**

The premises and welfare facilities were assessed as being barely adequate, but they were already being improved as part of overall company development.

#### **Other comments**

The company has been visited twice by the HSE and was advised on the installation of new equipment for the animal feed processes.

## **CASE STUDY 2**

### **Background**

This company, employing 30 staff, was established as long ago as 1964. They manufacture steel or plastic conveyer systems used, for example, in the food industry. They were recommended to contact their local Safety Information Centre by an HSE Inspector although the specific reason for this is not known. This they did in late 1998, a meeting taking place at the Safety Information Centre office. This does not appear to have been particularly helpful to them, being described by the present Production Manager as 'not very practical' and as having 'no specific benefits'.

### **Assessment of the safety management system**

The assessment revealed that all necessary documentation had been in place before the intervention. It was claimed that no improvements or additions were made as a result of the intervention. The assessor considered that all items of documentation were necessary but considered that training records and risk assessments were inadequate. In the latter respect there had been a failure to identify some major hazards which should have been apparent to experienced staff. These hazards must have been present for a number of years, as there was no evidence of recent changes to production methods.

Training was being provided for a number of activities, including for example manual handling, first aid, DSE and noise. Training was unmodified as a result of the Safety Information Centre intervention. It was considered by the assessor as inadequate for COSHH and for PPE usage. Maintenance standards had not been modified as a result of the intervention. They were assessed as adequate apart from those provided for PPE and exhaust extraction.

### **Premises and welfare facilities**

There were good welfare facilities, well maintained. In general, housekeeping standards were adequate and the company gave the impression of being well run.

### **Other comments**

The company had obviously not benefited from discussions with the Safety Information Centre, even though management had the benefit of experience of their manufacturing activities over a number of years previously. Lack of development of the health and safety management system was thought by the assessor to originate almost certainly from management attitudes. Such progress as had been made over the years probably resulted from enforcement visits rather than Safety Information Centre influence.

## **CASE STUDY 3**

### **Background**

A Bootle based company in the electronics sector, manufacturing remote radar instrumentation control systems. The company was established in 1979 and has 12 employees. The interview took place with the production manager.

The production manager contacted the local Safety Information Centre in 1999, because he wanted to ensure he was up to date with health and safety requirements. He had previously collected the Safety Information Centre card from a business meeting. The production manager found the assistance provided by the Safety Information Centre extremely useful. He felt that he would have not carried out the risk assessment without their help.

### **Assessment of the health and safety management system**

The assessor visited in early February 2000. It was apparent to him that the company had had a number of health and safety management documents prior to the intervention; these included an accident book, first aid book, and equipment maintenance records for fire extinguishers and portable electrical equipment. In addition the company had produced a health and safety policy statement and a risk assessment. Although the assessor felt that the risk assessment was adequate (apart from a number of minor modifications), the policy statement was considered unsatisfactory. It had not been signed and so was not necessarily accepted by the board.

The company already provided induction training and COSHH training. However following the Safety Information Centre advice, the induction training was improved and new training programmes were introduced to cover manual handling, first aid and use of display screen equipment. The use of display screen equipment was not considered adequate because eye tests had not been made available to staff.

The installed electrical equipment was already on regular maintenance programmes.

### **Premises and welfare facilities**

The premises were of good standard and well maintained.

### **Other comments**

The company is part of a larger organisation, but independent in terms of management systems and procedures including health and safety.

## **CASE STUDY 4**

### **Background**

An Ellesmere Port company employing 10 staff. The company was established in 1993, but had existed 8 years prior to that under a different trading name. The company manufactures control cables mainly used in vehicle engines. The interview took place with the Production Manager and the Managing Director.

The local Safety Information Centre contacted the company in June 1998 at the request of the local Business Link to which the company had made an approach for help with their health and safety management system. The visit was considered by the Production Managers to be very successful, particularly the help with risk assessment. Their comments were expressed in a very enthusiastic manner.

## **Assessment of the health and safety management system**

The company was visited in early February 2000 and was considered by the assessor to have good standards of health and safety management. This was highlighted by:

- The presence of a number of health and safety management documents including accident book, first aid book, training records and maintenance records. All were assessed as adequate.
- The large amount of good quality training including induction, manual handling, first aid, lift trucks and COSHH. All employees had training certificates.
- Good maintenance regimes for lift trucks, pressure systems and PPE.

The assistance from the Safety Information Centre enabled the company to develop both a health and safety policy statement and a risk assessment which were of adequate standards. Although the risk assessment was held as a computer file and not immediately accessible, staff were aware of it.

## **Premises and welfare facilities**

In line with other aspects of the company the facilities were of good standard and well maintained.

## **Other comments**

The fact that the company was working with ISO 9002 meant that documentation and training were well established.

## **CASE STUDY 5**

### **Background**

This company, employing 80 staff, has traded since the early 70s. They supply DIY goods (ironmongery, hand tools and a small range of power tools) to the trade.

The Customer Care Manager contacted the Safety Information Centre following an enforcement visit by an Environmental Health officer (EHO) investigating a Stanley Knife accident. They had been advised to take action on some points by the EHO but were not clear as to how to proceed. The Safety Information Centre meeting took place in the autumn of 1999, and covered a broad range of health and safety topics as well as the specific matters raised by the EHO. The meeting had been found most useful and had 'lifted the fog' on a number of points. The 5 steps to risk assessment had been explained and it was clear to the assessor that a good understanding of the process had been obtained. Advice had been given on seeking Local Authority (LA) help with setting up training courses, and this had been done.

## **Assessment of the health and safety management system**

The assessor visited the company at the end of March 2000. A number of features were found to have been in place prior to the Safety Information Centre intervention, including fire equipment, portable electrical equipment and lift truck maintenance, and accident and first aid recording. The health and safety policy statement had been updated as a result of the intervention and risk assessments had been started, were found to be to a high standard, but were not yet complete.

Manual handling and DSE training had been arranged with LA help, and adequate training records were now being kept. An inspection visit had been made since the improvements had been introduced, and this had gone well with no subsequent actions being advised by the EHO.

### **Premises and welfare facilities**

The premises were relatively new and were well maintained. Welfare facilities were good.

### **Other comments**

The assessor noted a high degree of commitment and enthusiasm, backed with a willingness to provide adequate resources to health and safety. Motivation appears partly to result from the Stanley Knife accident. A civil claim may result from this. The response of the Safety Information Centre clearly had an influence, and the firm's interaction with the Safety Information Centre appears to have triggered the positive attitude of the LA over training.

## **CASE STUDY 6**

### **Background**

This company was established in 1990 to blend, pack and distribute edible vegetable oils. Since their Safety Information Centre meeting they have expanded to manufacture mayonnaise. They employ 32 staff. The Technical Manager contacted the Safety Information Centre on the recommendation of a Workplace Contact Officer.

The meeting with the Safety Information Centre took place in November 1998 at company premises. The Technical Manager found it helpful in identifying hazards and assessing risks. As a direct result a machine was identified as causing accidents (by looking at the accident book) and was guarded. Also eye protection was started for a cleaning operation following observation of the activity and consulting product information. The company has had 5 HSE inspection visits in 17 months. Improvements, particularly to machine guarding, have followed, and the inspectors now seem satisfied with standards.

### **Assessment of the health and safety management system**

Risk assessment procedures and policy statement were both introduced as a direct result of the Safety Information Centre visit. Documentation for both was considered by the assessor to be adequate. Much of the work on the documentation was thought to have been complete prior to the HSE activity, though this undoubtedly influenced the final situation. Training and training records both improved as well. First aid training standards were enhanced, ear defenders, eye protection and safety footwear were introduced and COSHH identification and recording was brought up to standard.

Many other health and safety features were already in place, including lift truck, pressure system and fire equipment maintenance.

### **Premises and welfare facilities**

Buildings and equipment were assessed as being adequate and well run. It was noted that a separate mess room was provided for employees.

## **Other comments**

The assessor noted that one member of staff had attended food hygiene courses. These had a health and safety content, and this may have been of help to the company. The SIC input was considered to have been very useful however, and had made a significant contribution to the firm's health and safety awareness. (It may have indirectly saved them from prosecution over machine guarding, although there is no confirmation of this).

## **CASE STUDY 7**

### **Background**

This company was founded in 1974. It is a press-tool maker; designing and manufacturing precision components fitted in injection molding equipment and presses. There are 12 employees. A Workplace Contact Officer referred the Managing Director to the Safety Information Centre, and a meeting was held with the Safety Information Centre on site in May 1999. At that time the Managing Director was facing a civil claim arising from a back injury. Advice on this matter was considered particularly helpful. A number of other matters were dealt with as well, but mainly, according to the Managing Director by way of confirmation of measures already in place. The company had only received one visit from an HSE inspector. This was about two and a half years earlier. No problems had arisen.

### **Assessment of the health and safety management system**

The assessor, visiting in March 2000, found a fairly comprehensive health and safety management system in place. The Managing Director reported that he had required some help with both risk assessment and policy statement, although both already existed in some form before the Safety Information Centre meeting. For the former he had received 'assistance in recording', with the latter 'assistance in completion'. The assessor got the impression that the Managing Director had somewhat played down the help received.

Overall, the health and safety management system was considered by the assessor to be satisfactory. Training and maintenance standards were adequate. He noted that there had been a thorough insurance inspection of the premises, and that this had included health and safety. The insurance inspector had been satisfied with health and safety standards.

### **Premises and welfare facilities**

The premises were relatively new. Separate staff facilities were provided, including a canteen.

### **Other comments**

The Managing Director was very positive as to the overall value of the Safety Information Centre visit. They seemed to have wasted a lot of time with false starts in producing the health and safety documentation, and the assessor thought that an earlier visit would have been of greater value.

## **CASE STUDY 8**

### **Background**

This is a small company, with only 4 employees, designing and manufacturing cleaning equipment for the food industry. It was established in 1986. They completed a QA system and associated assessment in 1998. In the same year a large customer, asked to see their health and safety documentation. They sought help with this through the local Business Link and were put in touch with the Safety Information Centre. A meeting took place at the company premises in November 1998.

The intervention centred on helping produce a risk assessment. The Managing Director found this 'especially helpful'. It gave confidence in sending the completed document to the customer. Help was also provided setting up training for DSE and in the use of PPE. PPE was being used more consistently following the visit of the Safety Information Centre.

The company has never received a visit from an inspector.

### **Assessment of the health and safety management system**

The assessor visited the company in early March 2000. The policy statement, which had been prepared before the Safety Information Centre intervention, was clearly completely out of date. The risk assessment, performed following the Safety Information Centre visit was considered satisfactory. Other documents, including accident book, first aid book, training records and fire equipment and portable electrical equipment records were satisfactory, although the records for portable electrical equipment were not complete.

Maintenance standards were assessed as being adequate, lifting equipment and pressure system maintenance being checked by the relevant insurance companies. PPE was replaced as needed and supplies were available. As mentioned earlier help had been obtained over DSE and PPE training from the Safety Information Centre. The standards were considered adequate, as were those for COSHH training which was based on suppliers' information.

### **Premises and welfare facilities**

These were assessed as 'very good'.

### **Other comments**

The business has changed in the last 12 months. Almost all equipment is now bought in and so manufacturing activities are greatly reduced. Two employees are permanently based at the large customer and are thus subject to its health and safety standards, which were considered to be high.

## **CASE STUDY 9**

### **Background**

This company builds computer hardware systems, and develops the associated software, for the retail pharmaceutical industry. It employs 12 staff and was established in 1983.

The Managing Director contacted the Safety Information Centre in July 1998 on the recommendation of a visiting Workplace Contact Officer. He thought that the meeting, held at the company premises, had been useful, but mainly in providing confirmation that the company was on the right track as regards health and safety. They had spent a lot of time and effort in chasing false leads before producing adequate risk assessments. It was felt that an earlier intervention from the Safety Information Centre would have been very useful indeed and saved a lot of time.

They had not at any time received a visit from a health and safety inspector.

### **Assessment of the health and safety management system**

The assessor, visiting in late March 2000, reported that the health and safety management system was adequate, taking into account the relatively low risk of the working environment. All necessary documentation was found to be in place. The risk assessment was described as adequate. Training standards were good – induction, manual handling, first aid and DSE training was provided.

There was no major equipment needing regular maintenance, but fire equipment and portable electrical equipment were both maintained and adequate records kept.

### **Premises and welfare facilities**

These were described as ‘good’.

### **Other comments**

The assessor comments that at first sight, no positive result from the Safety Information Centre visit ensued, but in fact the Managing Director considered that a ‘very valuable service giving confidence in what we were doing’ had been provided. It was clear to the assessor that an intervention at an earlier stage in the development of the health and safety management system would have been of greater benefit. (It should be noted however that Safety Information Centre records suggest that no risk assessment had been performed prior to the time of the Safety Information Centre visit, or that if it had, no documentation was produced).

## **CASE STUDY 10**

### **Background**

This is a somewhat larger company, employing about 300 staff, with a third of them occupied in administration. The company undertakes sewer maintenance on commercial, industrial and domestic drains, and the lining of sewers. It was established in 1993. It works to ISO 9002. They had been visited by HSE inspectors on four occasions, two following accidents (no enforcement action taken) and two in connection with occupational health matters. As a result of the latter they were advised by the HSE to undertake specialised training.

The assessor visited in March 2000 and had discussions with the Health and Safety Manager. The interaction with the Safety Information Centre had obviously had little or no impact on the company. The Health and Safety Manager could not remember when he had been in touch with the

Safety Information Centre or how he had found out about it, although he thought it might have been via publicity in the Press. He could not remember what help he had been given.

### **Assessment of the health and safety management system**

The assessor found an adequate system in place, in terms of documentation and of training and maintenance standards. As already explained, the Health and Safety Manager could not recall any improvements that had been made as a result of the visit to the Safety Information Centre. The company's risk assessments were being continuously reviewed and improved using feedback from the work sites. The Health and Safety Manager was obviously the driving force behind these activities and he was well acquainted with health and safety law and its practical implications.

### **Premises and welfare facilities**

Headquarters was run to good standards – premises and facilities were adequate. No work sites were visited.

### **Other comments**

The assessor found a relatively large company, already well established and having available its own health and safety expertise. It was making good use of available resources and had a high degree of risk awareness. In the circumstances, it is not surprising that their Health and Safety Manager had learned little from the Safety Information Centre.

## **CASE STUDY 11**

### **Background**

This company, employing 30 – 35 staff, some part-time, specialises in the provision of outdoor activities for children from Local Authority residential children's homes. The Activity Centre was opened in July 1997.

The organisation has attracted a number of inspection visits, partly doubtless as a result of public anxiety about both children's homes and outdoor activity centres. There has been a Statutory EHO inspection, a Fire Authority inspection, and visits from the Department of Social Security and Local Authorities sending children to the Centre.

The Outdoor Education Manager visited the Safety Information Centre in June 1998 as a result of an increasing awareness of health and safety responsibilities. He found the one-to-one basis of the interview particularly helpful, and felt that it was 'safer' than seeking help from the Enforcement Authority. It was also helpful in creating a contact for future help.

### **Assessment of the health and safety management system**

The assessor visited in mid April 2000. He found an adequate health and safety management system in place. The Safety Information Centre had given important help with their policy statement, and had brought about significant improvements to risk assessment, the documentation being assessed as 'excellent'. These were the main areas dealt with, but some advice was also provided on COSHH training. Other training needs were being met and maintenance standards were satisfactory.

## **Premises and welfare facilities**

These were assessed as 'good'.

## **Other comments**

The environment presented significant risk to difficult and demanding young persons in an 'adventure' environment. There was also a high risk to staff, partly as a result of the activities involved, but also due to the possibility of violent assault by the young persons. The assessor was impressed with the way the risks had been assessed and controlled. The influence of the Safety Information Centre was thought to have been significant in bringing this about.

## **CASE STUDY 12**

### **Background**

This company refurbishes, installs and maintains photocopiers, mainly in shops. There are 12 employees and the business was established in late 1998. There has been one inspection visit. No serious problems were encountered, but advice was provided on electrical hazards. The office manager contacted the Safety Information Centre on the advice of a visiting Workplace Contact Officer.

The Safety Information Centre visited the company in mid 1999. The office manager reported that valuable assistance was given in identifying hazards, selecting appropriate control measures and in formulating policy statement and risk assessment documentation.

### **Assessment of the health and safety management system**

The assessor visited in mid April 2000. It was clear that the Safety Information Centre visit had led to the provision of a policy statement, risk assessments, an accident book and a first aid book. On the other hand training for first aid, COSHH and the use of gloves and respiratory protection had already been in place. Maintenance for the compressed air system and PPE (disposable items used and adequate supplies held) were satisfactory before the Safety Information Centre visit.

The health and safety management system was considered adequate for the relatively low-risk working environment involved. On the other hand there had been lack of practical follow-up regarding several control measures that they themselves had incorporated into their risk assessment. No training had been provided for manual handling for example and no fire extinguishers had been purchased.

## **Premises and welfare facilities**

These were reported as 'good'.

## **Other comments**

It was apparent that the firm would have been totally non-compliant with statutory requirements without the Safety Information Centre intervention. There were obvious shortcomings but the office manager seemed responsive to advice. The Safety Information Centre do not provide follow-up

visits, but such a visit might well have led to significant additional improvements to the health and safety management system.

## **CASE STUDY 13**

### **Background**

This small company, employing five staff, undertakes mechanical repairs on vehicles, not including bodywork. The company has been in operation since 1982. They had never received a visit from an HSE inspector, but a Workplace Contact Officer called in the summer of 1998. He found that many basic health and safety management features such as first aid and fire arrangements were in place. However the owner had not prepared a health and safety policy statement or undertaken risk assessments. The WCO suggested that he obtain help with these from the Safety Information Centre, and contact was made in October 1998.

The owner found the Safety Information Centre intervention most useful, providing help in the production of health and safety documentation. In particular, he considered that he would not have known how to set about preparing a risk assessment without Safety Information Centre help.

### **Assessment of the health and safety management system**

The assessor visited in May 2000. It was clear that the owner had made good use of other information sources before the Safety Information Centre intervention. For example he had consulted manufacturers in providing PPE for the various chemicals used by employees. Adequate training levels had also been maintained – informal induction training was being provided, while formally qualified staff, were used where possible. Good handling aids were in place to reduce manual handling risks. Maintenance standards were good – lifting systems, installed equipment and pressure systems were under insurer's inspection. Good records were in place for training and maintenance.

The owner claimed that all the above arrangements were in place before the Safety Information Centre visit. It was in connection with the policy statement and risk assessment that significant help had been obtained. The policy statement was assessed as adequate and was apparently routinely included in employment contracts. No hard copy of the risk assessment was immediately available, and the computer system failed when a printout was requested. The assessor pointed out that the observed high level of control of the workplace risks suggested that the assessment was likely to have been comprehensive and effective.

### **Premises and welfare facilities**

These were assessed to be of above average quality.

### **Other comments**

The company owner had a positive attitude towards health and safety and was an effective manager. The Safety Information Centre intervention had enabled him to formalise health and safety management, and the result was a high awareness and control of risks and slightly above average overall standards. This is in motor vehicle repair where the major agents have set high standards for a number of years.

## **CASE STUDY 14**

### **Background**

This company, established in 1997, provides parcel delivery and road haulage services. There are 30 employees, more than half being van and lorry drivers.

The Managing Director had received an Improvement Notice involving lift trucks and other matters following a LA inspection visit. Some problems were sorted by the Managing Director at his own initiative, but the local Business Link recommended contact with the Safety Information Centre and a visit was made by them to the company premises in Spring 1999.

The Safety Information Centre intervention was considered by the Managing Director to have been of particular assistance in formulating a health and safety policy statement and developing and implementing a risk assessment. It is of significance that on a follow up visit the LA inspector found the documents and arrangements satisfactory.

### **Assessment of the health and safety management system**

The assessor, visiting in May 2000, found an adequate health and safety management system in place. Both policy statement and risk assessment were considered to be appropriate. The risk assessment had identified hazards effectively and control measures were adequate, and were in routine use.

Maintenance standards were acceptable, contractors being used for fire equipment and lift trucks. Training was provided for first aid, display screen equipment and lift truck operation. Manual handling hazards were largely avoided by extensive use of mechanical handling. Good training and maintenance records were kept. The Managing Director reported that training and maintenance standards were improved before the Safety Information Centre intervention took place.

### **Premises and welfare facilities**

A large national company had previously used the premises. They were fairly modern and well maintained. Welfare facilities were adequate.

### **Other comments**

Company activities involved the transport of low hazard materials almost exclusively, although very occasionally moderate hazard materials were involved in small quantities. In the circumstances control measures were considered adequate.

## **CASE STUDY 15**

### **Background**

This company, based on the Wirral, was established in 1987 and installs hardwood floors. There are only 4 employees but labour only sub-contractors are used for installation work. One of the two partners running the company approached the local Business Link for advice in late 1998, having

been asked for their health and safety documentation during a tender exercise. The Business Link put the partner in touch with the Safety Information Centre and discussions were held in December 1998.

They had already obtained a number of documents on health and safety but had found it difficult to see how to apply the information. They had however succeeded in setting up a number of basic features associated with first aid, fire safety and training. The Safety Information Centre had been found to be very helpful, giving them a good start and providing a good basis for development of a full health and safety management system. They had already produced a health and safety policy statement but were assisted with a basic risk assessment that had subsequently been adapted for use at different sites.

### **Assessment of the health and safety management system**

The assessor visited both the company offices and a work site, in March 2000. He found the policy statement and risk assessment to be adequate for the site visited. He noted that the first aid book was missing and that the testing records for portable electrical equipment were patchy. Otherwise records were considered acceptable. Training standards were satisfactory – the Safety Information Centre had provided help with manual handling and COSHH training. PPE was provided and replaced when necessary. The main contractor often provided fire-fighting equipment, but it was noted that the company had its own extinguishers available when needed.

### **Premises and welfare facilities**

These will inevitably depend to a considerable extent on the main contractor. The company obviously worked at the better end of the trade, and apparently expected good standards for their workers. The site visited was satisfactory.

### **Other comments**

It was apparent that the Safety Information Centre involvement had been particularly useful in co-ordinating efforts and in giving confidence.

## **CASE STUDY 16**

### **Background**

This is a fairly large solicitor's office employing 36 staff and established in 1972. Health and safety matters are in the hands of the practice manager who works part-time. The practice manager had no direct experience of health and safety, but had worked for a number of years as an administrator in a chemical engineering company. This gave him an awareness of health and safety matters. He was anxious to obtain professional help in updating the company health and safety management system, and in particular in identifying key issues. He approached his local Business Link and was referred to the Safety Information Centre.

He found the meeting useful, particularly with regards risk assessment procedures. These he claimed had 'stood the test of time'.

## **Assessment of the health and safety management system**

The risk assessments were subsequently found to be adequate by the assessor, who visited in May 2000, although he suggested that violence be added to the list of hazards. He thought the policy statement, which had already been in place before the Safety Information Centre intervention, might be simplified. Documentation (other than risk assessment) had also been completed at that stage, and was full and adequate. Fire equipment and portable electrical equipment were maintained on contract. There were no other maintenance requirements. Training was being provided at adequate levels for induction and in manual handling, first aid, use of display screen equipment and COSHH for the cleaners. Again the training programme pre-dated the Safety Information Centre visit.

### **Premises and welfare facilities**

The assessor found that considerable pride was taken in the upkeep and appearance of the premises. Welfare facilities were satisfactory.

### **Other comments**

The practice manager was well motivated and could be expected to maintain continuing good standards. He had found that the Safety Information Centre intervention had been helpful and useful in getting the overall system set up.

## **CASE STUDY 17**

### **Background**

This charity was started from the manager's own home in November 1987. It maintains and operates minibuses used by community help agencies. The total numbers involved in the charity's operations are about 40, but many are volunteer drivers. All administrative and minibus maintenance work is in the hands of employees. The Workplace Contact Officer visited the charity in July 1999 and suggested they contact the Safety Information Centre representative.

The meeting was considered by the manager to be very helpful. The personal approach was particularly useful and made health and safety seem 'less forbidding'.

There had been no inspection visits to the premises.

## **Assessment of the health and safety management system**

The assessor visited in early June 2000, when he met the manager. He saw the pre-Safety Information Centre policy statement that was clearly not satisfactory. The new one and the risk assessment produced with Safety Information Centre help were both considered fully satisfactory. Other documentation, also pre- Safety Information Centre, was satisfactory apart for that for portable electrical equipment testing. Training standards were good. Training was provided for induction, manual handling, first aid, DSE and PPE use. The training also pre-dated the Safety Information Centre visit.

### **Premises and welfare facilities**

These were assessed as 'good'.

## **Other comments**

Positive, well-intentioned management. The charity had moved to new, larger premises since the Safety Information Centre intervention, but the nature of their operations had not significantly changed.

## **CASE STUDY 18**

### **Background**

This small company, employing 6 staff, manufactures labels, including cutting and printing, mainly using water based inks. The company was founded in 1998. It was visited in September 1999 by a Workplace Contact Officer who put the Managing Director in touch with the Safety Information Centre.

The Managing Director considered the Safety Information Centre visit 'useful'. Help was obtained in completing a policy statement and in performing the risk assessment. The visit was said to have provided general reassurance as regards health and safety.

The company received a visit from an HSE inspector only 2 weeks before the assessor's visit. The Managing Director had not yet received the visit report but nothing serious had been mentioned by the inspector.

### **Assessment of the health and safety management system**

The assessor visited in mid-June 2000. He considered the policy statement and the risk assessment to be satisfactory. He noted that they were not criticised by the inspector on his visit. Other documentation, already in place before the Safety Information Centre visit, was assessed as adequate apart from portable electrical equipment maintenance records. Portable electrical equipment represented only a low risk in this particular workplace. Training was also satisfactory apart from for FLT drivers. The trained driver present at the time of the Safety Information Centre visit had left, and two untrained drivers were now being used. The HSE inspector had required training for them and this was now under way.

Maintenance of FLTs, pressure systems and PPE was satisfactory. Lifting equipment was not being tested and certified either before or after the Safety Information Centre intervention, although the Safety Information Centre visitor might have missed this. The procedures were now taking place following the visit of the HSE inspector.

### **Premises and welfare facilities**

The company operated from new premises that were in very good condition.

### **Other comments**

The Managing Director wanted to learn and to provide good conditions. These were considered by the assessor to be above average.

## **CASE STUDY 19**

### **Background**

This company, employing 10 staff, manufactures new and replacement UPVC windows. The business was established in 1990. The company flourished and they moved to new premises in 1999. The joint Managing Director reported that they were ISO 9002 accredited.

Notification to the HSE of their move was accompanied by a request for advice. A WCO then visited and referred them to the Safety Information Centre for help. The Safety Information Centre visited in late 1999. The joint Managing Director considered the intervention helpful especially as regards preparation of a policy statement and a risk assessment. The policy statement had already been prepared, but help was received in 'fine tuning' it.

### **Assessment of the health and safety management system**

The assessor visited in June 2000. He considered the policy statement and risk assessment to be adequate although he had some concern about the noise level exposure of some of the operatives. They were provided with hearing protection but were not always using it.

Documentation, partly required for ISO 9002, was found to be satisfactory. This had been in place before the Safety Information Centre intervention. Training was satisfactory, again with ISO influence, apart from that associated with noise. Maintenance was satisfactory – fire equipment and pressure systems were on maintenance contracts, the latter at the instigation of the insurers. Both documentation and maintenance pre-dated the Safety Information Centre visit.

### **Premises and welfare facilities**

The premises were new and were assessed as being satisfactory for the activities undertaken. Welfare facilities were good.

### **Other comments**

The joint Managing Director was already aware of the noise problem, but appeared to be unsure as to what to do about it. He was keen to receive advice and was thought likely to follow it.

## **CASE STUDY 20**

### **Background**

This precision engineering firm was established as long ago as 1951. It has a machine shop with a wide variety of machine tools. There are 16 employees. Some, but not all production, is in making equipment for the food industry.

The firm was visited in autumn 1999 by the WCO. The Managing Director discussed health and safety with the WCO and decided to obtain advice and assistance, particularly with risk assessment. He was referred to the Safety Information Centre and received a visit in late 1999. They have had two visits from HSE inspectors in the last 8 years. The second was subsequent to the Safety

Information Centre visit. Minor guarding and maintenance were mentioned in the follow up letter. One guarding matter remained to be resolved when the assessor attended.

### **Assessment of the health and safety management system**

The assessor visited in early July 2000. The Managing Director had found the Safety Information Centre intervention to be 'most helpful' as regards risk assessment. The assessment was complete but was not assessed as 'adequate' as after nearly 8 months it had not yet been issued to staff. The policy statement had been in place before the Safety Information Centre visit. The assessor thought it adequate in content but that it required updating.

Other items of documentation were adequate, with fire equipment and portables on external contracts. Training was also adequate. That for lift truck drivers was required by the insurers, as was maintenance for lifting equipment, lift trucks and pressure systems. All maintenance was considered satisfactory apart from that for ventilation equipment. This was clearly inadequate. All documentation, training and maintenance was claimed to pre-date the Safety Information Centre visit.

### **Premises and welfare facilities**

The premises were fairly old but were well maintained and provided adequate space. Welfare facilities were satisfactory.

### **Other comments**

The assessor pointed out that this firm was typical of many small businesses where the Managing Director has a heavy burden of responsibility and a very full work schedule. This may well have been the reason why the risk assessment had not been issued, despite an obvious positive attitude towards health and safety.

## **CASE STUDY 21**

### **Background**

This small business designs, produces and installs surveillance systems (CCTV, video equipment etc.). It was established in 1998 and has 5 employees. Previously, the Managing Director had worked for many years in large companies involved in electronics. They are presently working towards ISO 9002.

The company received a visit from a WCO during the summer of 1999. As a result, the Managing Director realised that he needed up to date advice on health and safety legal requirements, and the WCO put him in touch with the Safety Information Centre. A visit took place in August 1999. The Managing Director subsequently reported that the visit had been 'helpful' and 'gave reassurance'.

### **Assessment of the health and safety management system**

The assessor visited in July 2000, almost a year after the Safety Information Centre intervention. He found that neither policy statement or risk assessment had been produced in the intervening period. On the other hand, other components of the health and safety management system were in place,

including documentation and induction and COSHH training (PCB etching). Portable electrical equipment and fire equipment were maintained on contract. The Managing Director reported that all these features were in place before the Safety Information Centre visit, although the assessor was of the opinion that training records had been improved as part of the ISO 9002 preparations.

Overall, the assessor thought the health and safety management system was adequate. The Managing Director's previous experience had enabled him to identify and control risks in an ad hoc manner.

### **Premises and welfare facilities**

This was a new small unit with good facilities.

### **Other comments**

The Managing Director had gained almost nothing from the Safety Information Centre visit, although he could, in the opinion of the assessor, have profited more. He was 'perhaps a little casual about health and safety'.

## **CASE STUDY 22**

### **Background**

This company was started in 1995 to design and manufacture kitchen units. There are 9 employees. They had moved to new premises since the Safety Information Centre visit but with the same number of employees

The Company Secretary thought that they had contacted the Safety Information Centre on the advice of a supplier of safety posters, but Safety Information Centre visit records indicate referral by a WCO. In any event the Safety Information Centre meeting took place in 1998, help being sought especially over risk assessment.

### **Assessment of the health and safety management system**

The assessor visited in early July 2000, slightly more than 2 years after the SIC visit. The Company Secretary said that the Safety Information Centre intervention had been helpful, enabling them to issue a risk assessment. In fact they had been helped to set up both policy statement and risk assessment. The former was assessed to be fully satisfactory while the latter was accepted with one reservation – manual handling was not included, although the employees, according to instruction, routinely sought help when moving heavy kitchen unit components. Other documents were adequate, and had been in place before the SIC visit. Training standards were considered to be satisfactory. PPE was provided and employees knew how to use it, but no measurements had been made of noise or dust levels. A good quality dust extraction system was in use however. Pressure systems and fire and portable electrical equipment were maintained on contract, the pressure systems at the behest of the insurers.

### **Premises and welfare facilities**

New premises with good facilities and high standards of housekeeping.

## **Other comments**

A well run company with an obvious pride of ownership.

## **CASE STUDY 23**

### **Background**

This recreation and social club was originally owned and operated by a large international company, but became independent in 1995. It provides facilities for a wide range of sports and social events. There are 20 employees, almost all part time. The secretary of the club heard of the existence of the Safety Information Centre from a friend and decided to make contact, as he wanted to find out more about risk assessment.

The Safety Information Centre meeting was held in late 1998. He subsequently explained that this meeting had been most helpful even though his documentation was actually produced by two other ex-staff members of the company that had previously owned the club. The intervention had provided a better understanding and confidence.

The club had not received any general enforcement visits, but a food hygiene inspector had called and had required some changes to be made in the kitchens. These were almost complete at the time of the assessor's visit in early July 2000.

### **Assessment of the health and safety management system**

The assessor found that the policy statement had been prepared before, and the risk assessment after the Safety Information Centre meeting. As the club secretary had not been directly involved in the preparation work the Safety Information Centre discussions had been important in helping put the documents into context as components of the overall health and safety management scheme. He was able to discuss the risk assessment in detail and justify individual points. Both documents were considered satisfactory, as were the associated additional documents, training (induction and first aid) and maintenance (fire and portable electrical equipment, and heating boiler).

### **Premises and welfare facilities**

The premises were maintained to a high standard and welfare facilities were satisfactory.

### **Other comments**

Outside production of important health and safety documentation does not automatically ensure that management understands how to manage. In this case, as a result of the Safety Information Centre intervention, the club secretary was able to prepare an effective risk assessment for an outside event held in the club grounds.

## **CASE STUDY 24**

### **Background**

A hairdresser's establishment employing 4 staff, it has been in operation since the 1970's, but was taken over by the present owner in September 1999. On taking over the new owner approached the local Business Link for advice over a number of matters and was advised to review health and safety standards with help from the Safety Information Centre.

Contact was made in late 1999, and the Safety Information Centre helped in the production of a policy statement and a risk assessment, as neither of these was in place at the time of the Safety Information Centre visit.

An EHO had visited once 6-7 years ago, but there had been no visit in the short period since ownership had changed.

### **Assessment of the health and safety management system**

The assessor visited in July 2000. The owner described the Safety Information Centre intervention as 'thorough' and it had enabled her to produce the policy statement and risk assessment documents. These were assessed as being adequate. Other documentation, inherited from the previous owner, was satisfactory. Training standards were satisfactory, but the assessor thought that induction training could be improved. COSHH standards were high – all staff were expected to understand and to comply with manufacturers' data sheets. The appropriate PPE was provided, maintained and used as required.

### **Premises and welfare facilities**

This was a normal shop premises. There was an adequate provision of facilities to a good standard.

### **Other comments**

An apparently well run business which has profited from Safety Information Centre advice to increase awareness of possible risks.

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