

## **UNISON's response to the HSE draft strategy '*The Health and Safety of Great Britain – be part of the solution*'.**

UNISON is Britain's largest public sector trade union with more than 1.3 million members. Our members work in the public services, for private contractors providing public services, and in the essential utilities. They include frontline staff and managers working full or part-time in local authorities, the NHS, the police service, schools, further and higher education, the electricity, gas and water industries, transport and the voluntary sector.

We welcome this opportunity to respond to the HSE draft strategy '*The Health and Safety of Great Britain – be part of the solution*'. Our response includes the views of our National and 12 Regional Health and Safety Committees.

### **General Comments**

UNISON welcomes the strategy and in particular its commitment to worker involvement and recognition of the important role that safety representatives play in making workplaces safer. Our health and safety representatives have played a vital part in improving health and safety in the workplace. Given the opportunity and improved provisions they could do more to further improve workplace health and safety and thereby contribute towards implementation of this strategy.

We are however concerned at how this strategy will be achieved. HSE has been run down and is thinly spread. Its capacity to deliver the strategy in terms of enforcement, policy and research will be severely hampered if the current reduction in funding and resources continues. Whilst it is clear that working in partnership with other stakeholders will help to make the strategy a success, the HSE must take an authoritative lead and needs to be adequately resourced so that it can further develop, deliver and raise the profile of its expertise on health and safety. Without a significant increase in resources we believe that the goals will prove too wide and will not be met.

UNISON will continue its campaign for increased funding for the HSE.

The contents of the draft are outlined in very broad terms and in some cases quite vague. The goals need to be more objective and should be set out as SMART objectives against which performance can be properly measured. This means assigning both 'size' and 'time' for each goal which are currently very vague.

We assume that a work programme will be developed to implement the strategy using the results of this consultation and we would be happy to be involved in this work.

**Do you support the goals as set out in the strategy and are there any omissions?**

UNISON broadly support the goals set out in the strategy.

We strongly support the emphasis on enforcement as we see this as key to gaining improvements on health and safety in the workplace and increased compliance of health and safety legislation. However we are disappointed at the suggestion that the HSE will merely “continue” this work rather than strengthen it as current resources enable just a tiny proportion of major accidents to be investigated and enforcement action is currently at minimum levels. Existing enforcement practice is simply not good enough. For example it is four years since the roll out of the HSE Stress Management Standards as a tool to help employers identify the causes and reduce the levels of stress. Yet evidence shows that stress levels in the public services still remain unacceptably high. For example a recent UNISON survey showed that 73% healthcare staff has seen stress levels in their workplaces rise. The HSE has always seen a combination of “carrot” and “stick” as necessary to tackle this issue. UNISON believes the key to tackling this issues lies in more “stick”, i.e. stronger enforcement.

There must be an increase in this area with adequate resources allocated so that major accidents, fatalities and work related ill-health can be properly investigated, and the current enforcement regime strengthened.

A report produced by the Centre for Corporate Accountability, *Making Companies Safe, What Works?* clearly demonstrates how enforcement is the key to compliance, even where education and encouragement are also seen as a tool. When the law is not effectively enforced, education and encouragement also fail. For further details view this report at: <http://www.corporateaccountability.org/dl/courtreport04/makingcompaniessa fe.pdf>

UNISON also welcomes the emphasis on increased competence and strong leadership. Increased competence would be greatly enhanced by joint training and joint working in partnership on campaigns. There is a good argument for combining different elements of training between enforcing agencies, health and safety managers and trade union safety reps. It is

understood that different emphasis is placed on aspects of the law but the underlying principles of health and safety prevention are accepted by all parties. Why not train together, enhancing understanding and preparing the way for joint working from now on? At the very least we should be doing joint updating and training on 'new' issues. Common understanding of risk and size of the hazard would also go a long way in ensuring proportionate risk management.

However, any joint training must be in addition to generic training for trade union safety representatives' training.

The emphasis on leadership is particularly welcome. Many of our safety representatives' have experience of good health and safety policies which have been jointly agreed being inappropriately implemented by managers at a local level due to competing priorities, inexperience and inadequate training. Some implementations have led to claims of bullying and harassment and are a direct result of poor training.

As the strategy quite rightly points out, good health and safety leadership is about accountability and responsibility. We believe that this can only be achieved by giving individual Directors explicit legal duties and accountability for health and safety. We hope that in implementing the strategy further consideration can be given to the issue of director's legal duties and responsibilities.. This legislation must form part of an overall strategy to ensure a proper health and safety culture in workplaces.

We are disappointed that the strategy has omitted any mention of a research agenda. Changes in the way work is organised, an ageing workforce, the current economic climate and changes in the labour market, such as the increase in migrant workers means that further evidence and research is needed. This will help to inform policy decisions and ensure that any legislation and guidance developed is both relevant and practical.

We are also disappointed to see that no mention is made of gender or diversity within the strategy. Work methods and work equipment continue to use the "one size fits all" approach, and research still tends to concentrate on problems associated with male dominated industries. As a result of changes in the labour market an increasingly diverse workforce now exist in the UK and as a result many of the existing health and safety interventions must now be reviewed to ensure that adequate prevention measures are in place for a wider and more diverse range of workers. We welcome the work being carried out by the HSE Diversity Unit and are committed to

working with this unit. However we believe that the HSE should demonstrate its commitment to this area of work further by including a specific strand on gender in the strategy. There is also no mention of the equality impact assessments. As these are designed to ensure that no groups are disadvantaged on equality grounds we believe that an equality impact assessment should be carried out at the design stage of all future research . This should be clearly spelt out in the work programme of the HSE and the resources set aside to ensure that this happens.

### **How can your organisation help us to deliver the goals?**

As a trade union with over 12,000 safety representatives UNISON can assist in the delivery of the strategy.

We have worked with the HSE on a number of campaign initiatives and will continue to do so. These have included signing up to the WISH strategy, promotion of the recent asbestos campaign and contribution to the Catering Liaison Committee's toolkit on preventing violence in the retail sector.

During 2007 we carried out a wide ranging survey on sickness absence policies. The results were used to produce a toolkit for safety representatives to use in discussions with employers on the development of policies around the issue.

We welcome the recognition within the strategy of the effectiveness of safety representatives' but believe that the HSE should do more to support these statutory volunteers. In particular we need improved support around time off for safety representatives' to carry out their functions and to receive training, as for many of our representatives this has become a major issue. We also welcome the publication of the TUC safety representatives' charter, which sets out a number proposals to increase the effectiveness of safety representatives' and will be campaigning for these proposals to be implemented.

The HSE have recognised that unionised workplaces are safer workplaces, known as the union effect. The safety representatives and safety committees legislation is now 40 years old and needs to be rewritten to reflect the way we work and organise today . In particular we need to recognise that safety committees and safety representatives operate at many different levels in many organisations and reflect the ways that the workplaces themselves are organised.

There are workplace committees that deal with the nuts and bolts, departmental or site committees that look at broader issues and central or HQ committees that deal with policy issues and items that are company-wide. Representatives at these different levels need differing amounts of time off, even just for travelling between sites. Also, representatives who have a genuine interest in health and safety tend to do more training and become expert at issues in their sector/industry.

UNISON also appoint a senior (branch) health and safety officer to head up the safety representation organisation wide – a position not recognised in law (unless they are accredited as a safety representative) and for which time off to carry out these functions are frequently denied. It would be helpful if a position such as this could be included in any revision of the SRSC regulations.

We organise a national health and safety seminar bi-annually which will be held on 26<sup>th</sup> March this year. The seminar is attended by up to 250 safety representatives where a number of workshops will be facilitated by various HSE units. We will ensure that the goals within the strategy are promoted at the seminar.

### **Can you help us to identify others who have a role to play in delivering the goals set out in the strategy?**

Partnership is at the heart of effective health and safety management yet too often employers choose to see health and safety as a specialised area for professionals and advisers rather than an issue in which the workforce should be directly involved. The principle of consultation and partnership is reflected in the Health and Safety at Work Act and in turn in the make up of the HSE Board. We see this as the model to be followed in delivering this strategy.

There is clear evidence to show that safety representatives keep workplaces safer, save lives and reduce work related ill -health. For these reasons vigorous enforcement of safety representatives rights and involvement must take place. One way of ensuring this happens is to consider appointing a high level champion of safety representatives' rights.

We whole heartedly agree with the principle that those who create the risk should manage it. Workplaces can only become safer if employers prevent and minimise risks by controlling hazards. Those employers who continue to flout the law should face stiff sentences and these should be widely

publicised. This would act as a deterrent and hopefully help to change behaviour. The Health and Safety (Offences) Act has provisions for bigger fines for more safety offences to result in a jail term and for more cases to be referred up to the higher courts. A prison term is also now possible in the lower as well as higher courts. We agree that such deterrents should be available for those employers who do not take their health and safety responsibilities seriously. The HSE must therefore take steps to increase the health and safety knowledge of the judiciary so that sentences begin to reflect the severity of offences.

It is time that we moved away from the message that good health and safety is a burden on business. The real burden is borne by those who are made ill, injured and killed, their families, colleagues, friends and society as a whole. All government departments should be encouraged to promote good health and safety management as a bonus rather than a burden to business.

We recognise the important role that human resources personnel play in developing and implementing systems of work and policies such as those relating to the management of sickness absence. For these reasons we believe that they should be fully involved in the delivery of this strategy.

There is also a need to develop better links with insurance companies and the legal service.

### **Who else should the HSE and the Local Authorities be engaging with to help deliver the goals in the strategy?**

Engaging with stakeholders will be crucial to the delivery of the strategy. We fully endorse the stakeholders set out in the draft under the heading "Everyone has a role". In addition to those mentioned above other stakeholders could include:

- schools and colleges, a sector who could better prepare young people for the workplace by delivering basic H&S training. Risk assessment and quantification of hazards should be taught in schools as part of the citizen curriculum, and reinforced as 'hazardous' activities are introduced.
- Federations, Guilds, Associations and other employers' organisations who could help to make their profession or trade safer. As full partners they would be included in any consultations and partake in the preparation of materials and other solutions for training and publicity campaigns.

- The Health sector, to develop prevention partnerships and the extension of occupational health into GP's surgeries and clinics.
- Professional bodies, trades unions, staff associations. We are all on the same side. By working together we make a much bigger impact than working in silos. In these tough economic times we could also consider pooling our resources to deliver improved health and safety solutions.
- Employment Agencies and other specialist 'casual/temporary' staff providers. They can help to ensure employees are trained to industry standard and provide that training including appropriate basic health and safety training.

We also believe lessons can be learnt from European and other international legislation, standards and good practice. For example, the European Agency for Safety and Health has made great strides in research around gender and health and safety. And research on safer needle devices has led to improved legislation around needlestick injuries in the USA.

In the UK it is estimated that up to 100 000 needlestick injuries occur each year. UNISON believes that it is vital to provide better protection to those at risk. These include healthcare workers local authority caretakers and refuse collection staff from blood-borne infections due to needlestick injuries is improved. The potential for fatal infection and the unacceptable uncertainty concerning the health outcome and the personal anguish that goes with it makes clear that existing legislation is not affording anything remotely like appropriate protection.

We are not aware of any enforcement notices around failure to risk assess and implement safer needle devices or following a RIDDOR reportable needlestick injury and believe that the HSE should seek to protect these workers by increasing enforcement action around this area. In addition, we would hope that the HSE will support any future legislative changes proposed at European level.

### **What should HSE and Local Authorities do differently to help deliver the goals in the strategy?**

In addition to our comments set out above we believe that the HSE should seek to build on what clearly works. There is clear evidence to suggest that increasing the levels of inspections in workplaces and improved provisions for safety representatives will help to develop good/best practice and increase compliance from employers.

We believe that the HSE should also enforce and improve the law to ensure that safety representatives' are consulted by their employers. Consultation is not an industrial relations issue, but instead is a legal requirement and if breached should result in enforcement action. When visiting a workplace, inspectors should also ensure that they always ask to speak to the safety representative.

We also want safety representatives to be given free access to HSE priced publications so that they are kept fully informed and updated on health and safety legislation ACOPs and guidance. We believe that Safety representatives' as statutory volunteers should not be expected to pay for the information they need to carry out their functions.

### **What parts of the goals in the strategy are best delivered by others?**

The goals must all be pursued in partnership with contributions from all relevant stakeholders. We do however agree that the HSE should concentrate its resources on workplace prevention issues and believe that their scarce resources are being used to focus on areas that are best left to others. For example responsibility for regulating all health and social care lies with the Care Quality Commission, and in addition the National Patient Safety Agency has a remit to reduce risks to patients receiving NHS Care. Within the health and social care sector there are a number of bodies involved in health and safety including Care Quality Commission, POSHH, and the NHS Security Management Service. However the success of these bodies is still dependent on proactive HSE participation, and therefore it should work with these groups to help with the delivery of the relevant goals. However it is crucially important that these organisations work coherently with the HSE so that messages and policies are consistent.

### **What can your own and other organisations do differently to help in the delivery of this strategy?**

Many of the goals set out in the strategy are those which UNISON has been promoting for many years. We work closely with employers throughout the public sector and will continue to highlight the need for coherent prevention policies in line with the strategy.

We fully support the work of the HSE and promote relevant campaigns such as the slips, trips and falls campaign and encourage our safety representatives' to promote these at a local level and bring them to the

attention of employers. We also produce information and guidance for safety representatives' that highlight HSE policy and best practice.

We are TUC members of a number of HSE Advisory Committees such as WISH, Partnership in Occupational Safety and Health in Healthcare, (POSSH), the Higher Education Safety and Health group (HESH), the steering group on Directors responsibilities and the British Occupational Health Research Foundation. We hope that the HSE will take steps to bring other committees, groups and forums back into the tripartite HSE Board structure as the full and effective involvement of tripartite IACs will also help to implement the strategy.

## **Summary**

We welcome the draft strategy and in particular its focus on prevention, enforcement and the involvement of safety representatives'. However we hope that two areas will be clearly looked at when attempting to implement the goals set out in the strategy. Firstly, adequate resources are needed to ensure that the strategy will work. However good the strategy is it won't make any difference if the capacity of the HSE remains under funded and understaffed. Secondly, we need to see the detail - the strategy means in practice and assume that a work programme will be developed to outline this..