

Strategy consultation - online feedback

Please read our strategy and tell us what you think. Deadline for sharing your views is 2 March 2009. Once you have completed form please e-mail it to us at strategy@hse.gsi.gov.uk or post it to:

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

BOHS fully supports the vision of a return to the principles of good health and safety practice within workplaces.

The document is less clear on the strategy for achieving this. Our view is that greater knowledge and awareness of occupational hygiene will be necessary to understand risks to health in the working environment and their control. We think this aspect could receive more attention when looking at plans for bringing about a further downward trend in work-related deaths, injuries and ill-health. Changes in attitude and behaviour are needed amongst many employers, employees and regulators.

The strategy document is a little confusing. It lists ten Goals for HSE to achieve its Vision, then summarises these on the last page under four headline goals. What isn't mentioned is the "Revitalising H&S" targets - 10% reduction in deaths/major accidents, 20% reduction in the rate of occupational ill-health, 30% reduction in lost working days; I hope these have not been quietly forgotten.

The goal on reinforcing worker involvement is too narrow. HSE should look at a wider "promotion of good practice", of which active worker participation is one feature. This includes technology and people - a good analogy is with the concept of BAT in environmental legislation.

The goal addressing customising support for SMEs is quite general and does not suggest concrete ways of doing this. The Engineering Control/LEV project has the potential to do this and may be a good model.

It is surprising that REACH is not mentioned in the goals to create healthier, safer workplaces. This legislation drives supply chains to implement effective Risk Management Measures and could give a boost to HSEs efforts.

Effective enforcement of H&S legislation is a powerful tool for HSE and can act as an exemplar and deterrent to others. There is still a widespread feeling among SMEs that "we never see an inspector" and a more regular programme of site visits can make a difference.

One of HSE's traditional strengths has been to provide authoritative guidance and information on all aspects of H&S and this should be made part of the Strategy. Also HSE should have a strategic commitment to act as champion and funder of important research projects to advance fundamental knowledge and understanding. Continuing support of the work of HSL and university/FE courses in H&S is vital.

Finally the Strategy does not explicitly address HWWB and the interface between work and general/public health. It would be helpful to see mention of how this fits in to the overall picture..

How can your organisation help us deliver the goals?

A large part of what BOHS does is closely aligned with the aims of the HSE. A significant number of BOHS members work for HSE and are active in the Society so we are closely connected with a number of initiatives through joint seminars and workshops. The BOHS would therefore welcome the opportunity to nominate a participant to join the Council on Occupational Health.

Founded in 1953, the British Occupational Hygiene Society (BOHS) is a learned and professional society with the objects of improving scientific knowledge and practice in the prevention of ill health from occupational and environmental hazards. Its members are drawn from a wide range of multidisciplinary specialities and include leading academics and practitioners in the field. Our organisation includes the Faculty of Occupational Hygiene, which provides examinations and qualifications in occupational hygiene. Our publication, the Annals of Occupational Hygiene, is acknowledged as one of the leading global scientific journals in the field. BOHS has worked for over 50 years to prevent ill health from work.

In principle we can help with many of the stated goals, in particular the promotion of knowledge and competence related to the recognition, risk assessment and control of health hazards in the work environment. We are particularly well placed to help with those relating to ill health, as opposed to those relating to the prevention of accidents.

Specifically in relation to identified goals within this proposal, the need for strong leadership and accountability is well stated, but how that accountability will be realised is not explained. There are a few references to trivial "elf and safety" approaches and this is possibly an area where BOHS can help to provide an objective view of the underpinning science to help dispel misconceptions that appear in the press and media.

HSE is right to single out the need to encourage an increase in competence, and its promotion of the BOHS courses P601 and P602 in the new HSG 258 guidance is a good example. We need to see a lot more of this. BOHS is willing to continue its work with HSE to identify new ways to extend training and competence, e.g. badged courses, webinars..

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

BOHS has links to many societies around the world that share our aims related to occupational hygiene. Through our members, we also have contacts with regulators and industry.

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

The regulatory framework and the guidance produced by HSE provides a good basis for the improvement of health and safety. The real challenge is for the enforcement agencies to communicate with the large number of employers and to ensure that these regulations are understood and complied with.

Where HSE has conducted targetted campaigns this appears to have been successful and we would encourage more effort in this area. The use of enforcement (or the threat of enforcement), persuasion, education, awareness-building and communication of the business case for good health and safety seem to us to be helpful.

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

We believe that the importance of occupational hygiene professionals in delivering the strategy has been undervalued by HSE. Firstly, many hygienists provide services direct to SMEs. Secondly hygienists in large organisations need guidance and support from HSE in order to be effective. Yet HSE has failed to reinforce the need for competent practitioners and is progressively withdrawing the technical guidance that hygienists value. There is untapped potential to leverage hygiene professionals to deliver the strategy.

Also in recent years we have seen:

- a loss of focus on serious long term illnesses such as cancer and chronic respiratory disease, where interventions are not quickly reflected in ill-health statistics.
- a shift of priorities away from "traditional" issues such as silica, that were regarded as solved but which in fact are ever-present hazards that need ongoing management.
- a loss of leadership from HSE which has impacted on the viability of research and education across the UK and our ability to influence developments in Europe.

We believe there are opportunities for enhanced collaboration with the Society on strategic direction, research priorities, and education and training. We think it is important to identify key issues, to have a clear strategy for addressing them, and the determination to follow through and ensure that the necessary improvements are made.

From our perspective, we would like to see a greater focus on work-related ill health and the competencies to recognise and control those risks. Although the phrase 'health and safety' implies an equal emphasis on each, in practice we believe that there has been a greater focus on (and arguably greater progress in) workplace safety. There is still much to do to address work-related ill health.

There is a need for more professionals who are competent in occupational hygiene, if real progress is to be made in reducing work-related ill-health.

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

This is not clear.

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

BOHS would welcome the opportunity to nominate a participant to join the Council on Occupational Health. This would enable BOHS to contribute expertise and to continue our record of cooperation with HSE to reduce health risk in the working environment.

Name

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