RoSPA NOSHC Inquiry into OSH assistance to SMEs: a map

Howard Fidderman, 12 April 2007

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PART A: OVERVIEW

1. THE NOSHC INQUIRY

This report represents the first, preparatory stage of the Inquiry into occupational

safety and health (OSH) assistance to small and medium-sized enterprises

(SMEs) that is being undertaken by RoSPA's National Occupational Safety and

Health Committee (NOSHC). The report comprises a map of the actors and

activities involved in OSH in SMEs, together with some conclusions and

suggestions for questions that the Committee might wish to address during the

main stage of the Inquiry.

The terms of reference for the Inquiry are:

• to identify and evaluate good practice, barriers and missed opportunities

associated with current work by intermediaries aimed at promoting, developing

and sustaining effective OSH management in small firms (less than 50

employees); and

to make recommendations for action.

NOSHC asked the mapping stage to look at:

· what is going on?

to what extent does the activity reach SMEs?

who are the gatekeepers?

what is the quality of advice, services etc?

The main stage, which is scheduled to take a further 12–18 months, will involve

an Inquiry by NOSHC members that will:

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- seek written and oral evidence from intermediaries and other stakeholders;
- review the evidence base concerning OSH in small firms;
- consider the efficacy of current sources of information and advice;
- consider international experience; and
- focus on options for improving communications, the provision of competent
 OSH advice and services to SMEs and approaches to monitoring performance.

NOSHC has indicated that it would like, in the second stage, to look at issues such as:

- excessive bureaucracy, for example in pre-tender OSH assessment;
- duplication of effort;
- poor selling of the OSH message, failing to appreciate SME problems and motivations;
- inappropriate consultancy advice;
- poor advice leading to inappropriate "risk aversion";
- inappropriate training courses for SMEs; and
- applying large firms models to small firms.

NOSHC hopes that the Inquiry might allow:

- sharing good practice in engaging SMEs on OSH;
- the case for mutual recognition of OSH assessments by different actors;
- sharing good practice in innovative approaches to training;

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- mutual signposting promotion of useful services and networks;
- developing SME interest in the wider work and well being agenda;
- building OSH into other business development and support processes; and
- identification of opportunities for networking, benchmarking and joint working.

The current membership of the Steering Group for the Inquiry is set out at appendice 1.

2. INITIAL CONCLUSIONS

This map is based largely on looking on the internet, backed up by telephone work and a limited literature search. As such, it will not have captured every potential player. Further, where it identifies a lack of availability of advice, it may also be that it is merely a failure to locate it. That said, it is unlikely that an SME would find it easily either. The conclusions are:

- There is a plethora of initiatives to help SMEs. Many of these are of a high quality.
- Too few of these initiatives recognise the validity of each other, resulting in duplication of effort and resources.
- Many of these initiatives regardless of their purpose draw on common ground, notably around the MHSW Regulations and basic HSW Act requirements and HSG65.
- It is difficult to determine the extent to which these schemes are reaching SMEs. The short answer is unsurprisingly that the extent of penetration varies. Much of the available information is optimised or geared towards marketing claims. That said, there are success stories, including trade associations, and other less obvious bodies, such as fire authorities, the Learning and Skills Council and first-aid trainers that might offer access to large numbers of employers.
- SMEs have potential access to large amounts of information. Much of this is simple, free and practicable, and it is no longer possible to claim that it does not

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exist or is inaccessible. But too many SMEs still do not access, or implement, this information appropriately.

- The HSE offers many excellent services for SMEs, but there are issues around the extent of the take-up and the fact that they emanate from the HSE.
- Most OSH services are offered in isolation from the softer skills that SMEs might need.

3. POSSIBLE QUESTIONS AND AVENUES FOR THE NOSHC INQUIRY

The possible questions and avenues below are suggestions only.

- Given the breadth of SME initiatives, should the inquiry pursue an overall
 approach to OSH assistance to SMEs or concentrate on one or more aspects?

 This mapping exercise would suggest that the inquiry's time and resources might
 be best spent on a small number of specific initiatives where it might have the
 largest impact.
- One option that the inquiry might want to consider is the development of a prequalification standard (possibly under a RoSPA umbrella). Pre-qualification can have an immediate and relevant impact on SMEs; there are also some excellent schemes that could be drawn on and this is likely to offer a better route than RoSPA developing its own scheme. While there is unlikely to be a need for new NOSHC thinking on contractor pre-qualification per se, NOSHC might want to explore both routes. Regardless, any initiative should concentrate on helping SMEs understand where they are at and where they need to be (and how to get there), rather than ending up with a "tick box" approach.
- One conundrum here is how to balance the need to establish core, common criteria with the desire of SMEs to have industry-specific assistance, while keeping the system easy-to-use. Also, who would "approve" the method and/or body that sets any standard?

- While it might be relatively easy to persuade some organisations to participate, for example government bodies, how can commercial providers of, for example, registration schemes, be persuaded to come on board?
- In addition to the obvious players that interact with SMEs (HSE, local authorities etc), there are others, including fire brigades, that might offer interesting routes to reaching and influencing SMEs. There are other types of bodies that may have good often sector specific outreach but might welcome some OSH assistance, for example professional institutions and research bodies such as CIRIA and FIRA.
- Another option that the Inquiry might want to consider is whether there is a need for a forum that brings together some of the diverse SME players in this map to work together, exchange information and lobby? Also, what would RoSPA's role be in any forum?
- The Inquiry should also consider from the outset how it will disseminate its initiatives. Several publishers or organisations with magazines for example, Tolleys, RoSPA and BSC claim to have circulations of up to 30,000, with significant penetration into SMEs. These claims should be treated with a degree of caution, as the amount of SME readership is unlikely to be high. They may, however, offer a chance to influence larger clients, as will Barbour and others.
- The Inquiry should ensure that it looks at health as well as safety when seeking evidence about existing provision and considering its own initiatives. There is evidence that SMEs are often less interested in health issues, partly because they do not perceive themselves as affected by the consequences.

- Should the Inquiry focus on safety and health, or also encompass areas such as absence management and rehabilitation or major OSH topics not currently being pushed by the HSE such as work-related road safety? A wider portfolio would reflect the current holistic tendencies of government and might be attractive to SMEs, but it might also exacerbate an already complicated picture. Regardless, the Inquiry should consider carefully the importance of placing any initiatives in the wider business context.
- The hearings might want to ask for information on the quantitative take-up of the various schemes, as well as qualitative evidence on the effect of the schemes.
- The Inquiry should consider whether it want to look, in detail, at the experience in Scotland because it is, in some ways, ahead of England.
- The Inquiry might want to look at the types of monitoring that bodies such as
 the Learning and Skills Council carry out of providers' assessments of employers
 OSH standards? What guidance do these bodies issue for the competence of the
 assessors?
- The Inquiry needs to confirm the sizes of firm that it wishes to concentrate on.

 The terms of reference are explicit that the target is firms with fewer than 50 employees, but the Inquiry is entitled "into SMEs" (which are generally up to a maximum of 250 employees).
- The Inquiry also needs to be clear whether it is looking at firms at the smallest end of the spectrum, ie sole traders and those with just a handful of employees.

This is an important decision because there is likely to be as much difference between a micro and a small-to-medium size firm as there is between an SME and a large firm. Micro-firms will have overlapping and different needs from other sizes of SMEs.

- Any initiatives will also need to recognise that small firms are not small versions of large firms.
- Any initiatives that the Inquiry might wish to proceed with should consider whether there is a need to integrate softer, non-OSH skills and expertise with OSH advice.
- The Inquiry might want to ensure that it calls evidence from organisations on what they are doing in terms of migrant and non-English speaking workers, and from minority-representative organisations.
- The Inquiry might want to consider the extent to which size really does matter,
 or is OSH management equally influenced by factors such as access to advice,
 sector and client attitude?
- The Inquiry might want to look at how any initiatives could comprise an element of face-to-face contact with SMEs, which appears often to be a pre-requisite for success.

4. SMEs OVERVIEW

4.1 SME numbers

A report by the National Audit Office¹ into the work of the Government's Small Business Service noted that in 2003 (the latest data then available), of the 3.5 million businesses in England, only 5,400 had more than 250 employees. All the rest were either small (fewer than 50 employees) or medium-sized (50–249), employing 57% of England's private sector workforce. In a similar vein, the Government's small business strategy, first published in December 2002², noted that small businesses contribute 51% of private sector turnover and employed 12.5 million people in 3.7 million businesses.

4.2. Problems faced by SMEs

The problems that SMEs face include: low levels of contact with enforcing authorities; poor accessing and understanding of information; the temporary or casual nature of the work; price-cutting by larger organisations; low levels of trade union representation; lack of internal health and safety competence, exacerbated by a lack of access to specialist external advice; stretched, incompetent, disinterested or frightened management; and insufficient time, money and other resources.

4.3 SME injury and ill-health rates

It is generally accepted that these problems have contributed to higher injury and ill-health rates, ie accident rates rise as organisational size decreases. The

¹ "Supporting small business", National Audit Office, May 2006, www.nao.org.uk/publications/nao_reports/0506/0506962es.pdf

² "Small business and government: the way forward", www.dti.gov.uk

picture is, however, more complicated, and the research usually confined to injuries. In one HSE study, for example, the rates of fatal and amputation injury in manufacturing workplaces with less than 50 workers were double those with more than 200 employees, and the rate of major injury requiring immediate medical treatment was 25% higher in small workplaces than in larger ones³. (Similar findings arise from the Labour Force and Workplace Industrial Relations Surveys (WIRS) and the Workplace Employment Relations Survey.)⁴

But a study carried out by the Institute for Employment Research (IER) found that the smaller the firm, the lower the injury rate, and that this was regardless of reporting levels⁵. Research carried out by Entec⁶ found medium-sized organisations reported more "less than one day" accidents than large or small organisations, and that larger organisations (1,000+ employees) had 25% fewer "less-than-one-day" injuries than smaller organisations (<1,000 employees). The proportion of injuries requiring one or more days off work decreased slightly with the size of organisation, and non-fatal major injuries were more evenly spread across different sizes of organisations.

Other research shows a different picture for all-injuries, as distinct from fatal and major injuries, with frequency actually increasing with size for lost-time injuries⁷. This may, however, be attributable to the likelihood that SME workers will have

³ Stevens G (1999), "Workplace injuries in small and large manufacturing workplaces 1994/95 – 1995/96", Labour Market Trends, 107, 1, pp. 19–26.

⁴ Cully M, Woodland S, Reilly A and Dix G (1999), "Britain at work as depicted by the 1998 Workplace Employee Relations Survey", Routledge.

⁵ McKnight A, Elias P and Wilson L (2001), "Workplace injuries and workforce trends", Institute for Employment Research, University of Warwick, CRR 281/2001, ISBN 0 7176 1829 3.

 ⁶ Lancaster B, Ward R, Talbot P, Brazier A (2003), "Costs of compliance with health and safety regulations in SMEs", Entec UK Ltd, RR 174, ISBN 0 7176 2782 9.
 ⁷ Walters D (2001), "Health and safety in small enterprises – European strategies for managing

Walters D (2001), "Health and safety in small enterprises – European strategies for managing improvement", PIE - Peter Lang, series "Work & Society", no.31, 2001, ISBN 90 5201 952 5, Brussels-Bern.

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poorer sick-pay provision and are therefore more reluctant to take time off work, or that they will feel greater personal responsibility towards their colleagues or employer, or that SME owner-managers will be less likely to report minor injuries. It should also be remembered that whatever the relationship between size and injury rates, most SMEs will never, or rarely, experience a serious injury and will therefore not perceive themselves as being at higher risk merely because of their small size.

PART B: THE MAP

5.1 Map groupings

The map is split into 10 groupings. This is not without problems: some entries could appear in more than one section, for example, CHAS (the Contractors' Health and Safety Assessment Scheme) appears under supply chain initiatives, but could equally fit into "Official – OSH specialist". The split is merely to make accessible what would otherwise be a huge list of players.

OFFICIAL BODIES – OSH SPECIALIST: HSE, local authorities, Scotland, EU.

OFFICIAL – NON-OSH, NON-SME SPECIALIST: government and political drivers, fire authorities, employment service.

ORGANISATIONS SPECIFICALLY FOR SMEs: facilitation (Business Link, Small Business Service) and representative (Federation of Small Businesses, Forum of Private Business, Institute of Directors, CBI).

TRADE ASSOCIATIONS: EEF, Construction Confederation, Electrical Contractors' Association, British Safety Industry Federation etc.

FINANCIAL SERVICES: banks, insurers.

EMPLOYEE ORGANISATIONS: worker safety advisers, union activities, HSE worker involvement programme, migrant workers.

TRAINING ORGANISATIONS, AWARD BODIES: Learning and Skills Council, Sector Skills Councils, LANTRA, Leitch Review, Construction Industry Training Board, Major Contractors Group, Schools, Qualifications and Curriculum Authority, Small Firms Development Initiative, Investors in People, local colleges.

SPECIALIST OSH PROVIDERS, CHARIITES: OH providers (NHS Plus), independent consultants, OSH organisations (RoSPA, British Safety Council, IOSH), Safety Groups UK, first-aid organisations (British Red Cross, St John Ambulance).

SUPPLY CHAINS: Achilles, Constructionline, CHAS, SAFE*Contractor*, Partnership Sourcing Ltd, company-specific initiatives.

CERTIFICATION AND STANDARDS BODIES: BSI, OHSAS 18001 and 18002, Det Norske Veritas, SGS Yarsley International Certification Services Ltd.

5.2 OFFICIAL BODIES - OSH SPECIALISTS

5.2.1. OSH regulators

The HSC/E are involved through inspection, advice, visits, campaigns, research etc. They run specific initiatives aimed at SMEs, and are prescient of SMEs in general initiatives. Local authorities carry out inspection and advice. They are also involved in pre-qualification schemes such as CHAS. In February 2007, the HSC "noted" the HSE's proposals⁸ to wind up – one year early – the formal "Business involvement strategic enabling programme". This followed a "Fundamental Review" of the HSE's work and has resulted in a "reprioritisation" of the programme's "workstreams". "Think small first" (information, advice and guidance) remains one of the four "highest priorities" that are "to be actively pursued" (see box).

The paper claims the programme has "established itself as a source of expertise" on small business issues within the HSE, resulting in a network of contacts throughout the HSE who provide regular input into online guides for businesslink.gov.uk (a website provided by the Small Business Service), and is currently developing information on the regulatory requirements according to business type.

Specific HSE SME initiatives include:

⁸ "Business involvement programme – review and forward look", 6 February 2007, HSC/07/03, www.hse.gov.uk/aboutus/hsc/meetings/index.htm.

- a small businesses website⁹. This provides advice for established and new businesses, including an introductory guidance for SMEs¹⁰, a priced starter pack¹¹, as well as links to Workplace Health Connect, Business Link, Small Business Service and Business Gateway.
- The HSC has a Small Business Trade Association Forum. Its role may be limited in that it mainly comprises trade associations and appears to concentrate its activities on having an input into HSC/E activities and decisions. The group does, however, allow members to make suggestions for initiatives: prequalification criteria was one such initiative. The HSE paper on its business involvement programme deemed the forum a success, growing from 12 to over 40 members and helping develop policy and disseminate messages. An evaluation had concluded that HSE officials and forum members believed the forum "added value" and that "there was a need and appetite for it to continue".
- The SME Indicator¹², although this purports to be a Business Link initiative and plays down any HSE connection, possibly intentionally. The site claims that it takes just 15 minutes to complete, although my own trial using a fictitious company took 50 minutes. It focuses on common risks faced by SMEs, rather than management processes. The original indicator was developed by Greenstreet Berman on behalf of the HSE, with the cooperation of the Small Business Service, the Association of British Insurers, the British Insurance

⁹ www.hse.gov.uk/smallbusinesses/index.htm

¹⁰ www.hse.gov.uk/smallbusinesses/pack.htm

¹¹ www.hse.gov.uk/smallbusinesses/pack.htm

www.businesslink.gov.uk/bdotg/action/haspi?furlname=healthsafetyindicator&furlparam=healthsafetyindicator&ref=http%3A//www.shemsonline.co.uk/SHEMS%2CLinks/150.aspx&domain=www.businesslink.gov.uk

Brokers Association and the Federation of Small Businesses. The HSC had hoped that it would lead to reduced employers' liability insurance premiums: NOSHC might want to look at whether this has been the case and also whether it has been used for benchmarking or contracting purposes.

- The HSE launched a Better Business campaign in January 2006 in an attempt to raise awareness among SME owners of the financial and personal costs and causes of workplace incidents¹³. The campaign comprised a national advertising campaign in non-specialist and trade press and a "Better business" micro-site that contains six sections that take small businesses through the basics of health and safety. It includes a rather pointless interactive quiz (again rather narrowly focused on absence costs), and links to existing HSE tools, including the SME Indicator. A survey¹⁴ commissioned by the HSE to inform the campaign found that OSH came bottom of the priorities list for small businesses. Shortly before the Better Business campaign, HSE-commissioned research revealed that SMEs find it difficult to relate to information on the cost of accidents and failures, and would prefer more proactive approaches such as practical tips on specific issues.
- The Workplace Health Connect pilots. This is a government-funded advice service for SMEs (5–250 employees) and their employees that started on 23 February 2006¹⁵. An HSE-commissioned evaluation of the first eight months of the initiative found that, as of November 2006, less than 4,000 calls had been received by the advice line, falling significantly short of planned levels. But take-

www.hse.gov.uk/betterbusiness/index.htm
 UK small business New Year resolution opinion survey 2005, Continental Research, not publicly available www.workplacehealthconnect.co.uk/ or www.hse.gov.uk/workplacehealth/service.htm, tel: 0845 609 6006

up of workplace visits was "robust" and remains on track to reach planned levels. As of November 2006, 1,800 SMEs had been referred for visits and 1,130 adviser visits conducted. The HSE claims that the report shows that the "early positive signs have been confirmed ... [and] the service has so far successfully engaged with employers representing over 305,000 employees, with the overall level of satisfaction with the service extremely high" Nevertheless, the HSE decided that resource limitations prevented launching a seventh pilot. The HSE says the £20 million "exciting major project" is "on a scale unlike anything we have done before". The Workplace Health Connect site also provides information on the main risks faced by small businesses, for example asthma, falls from height, noise, slips and trips, stress, vehicles at work and vibration.

- The worker safety adviser challenge fund (see below)¹⁷.
- The HSE introduced "health and safety awareness officers" in September 2004. The officers' main purpose is contact and interaction with duty-holders in small firms and others that the HSE is seeking to influence in difficult-to-reach groups. Their inception recognises evidence that established contact methods, including inspection, are effective in large and traditional industries, but work less well for SMEs. They are also a recognition that some "new to HSE" firms are fearful of contacting the HSE, and that some businesses that have never been inspected would welcome an advisory visit but would prefer that this not be made by anyone with an enforcement role.

¹⁶ "Workplace Health Connect: January 2007 progress report", Institute for Employment Studies, www.hse.gov.uk/workplacehealth/evaluation.htm.

¹⁷ www.hse.gov.uk/workers/wsa/wsachallenge.htm

 Research into what motivates SMEs. Most recently, a study of six SMEs found that improving OSH was integral to business risk management, and that the organisations were motivated to do this because of the potential risk to the business¹⁸.

Recent and future general developments and initiatives include:

- the HSC/E's Simplification plan¹⁹ contains several proposals that will help SMEs, notably the general saving of 25% of an employer's OSH "administrative burdens" and, in particular, scrapping of over half of the forms that employers currently complete;
- revised guidance for directors (spring 2007); and
- research²⁰ published in June 2006 showed that business reasons and legal compliance were the main drivers of board-level involvement in OSH.

5.2.2 Scotland

The Scottish Centre for Healthy Working Lives ²¹ brings together "Scotland's Health at Work" and "Safe and Healthy Working".

• Safe and Healthy Working²² is a support service for SMEs in Scotland. It offers confidential advice to employers and employees and access to OSH advice through a website, confidential helpline and network of field advisers who assess OSH needs in the workplace. It is also piloting clinical services run by Grampian,

¹⁸ Six SME case studies that demonstrate the business benefit of effective management of occupational health and safety, RR504, www.hse.gov.uk/research/rrhtm/rr504.htm

^{19 &}quot;Simplification plan", www.hse.gov.uk/simplification/index.htm.
20 Case studies that identify and exemplify boards of directors who provide leadership and direction on occupational health and safety", Greenstreet Berman, June 2006, RR 450, HSE Books.

21 www.healthscotland.org.uk/hwl/index.cfm
22 www.safeandhealthyworking.com/

Fife and Glasgow NHS Boards that will enable GPs to refer patients for an expert occupational assessment at a monthly half-day session, run by either an occupational consultant or OH nurse adviser.

- Scotland's Health at Work (SHAW)²³ is a national health award scheme and partnership comprising CBI Scotland, STUC, Scottish Enterprise, Highlands and Islands Enterprise, COSLA, the HSE, the Federation of Small Businesses, the Scottish Executive, NHS Health Scotland and the 15 NHS Boards. Established in the late-1990s, it aims to encourage and support workplaces in the active promotion of good health. It hoped to cover 40% of the Scottish workforce by the end of March 2006. Although there is no statement as to whether it met this target, it should be noted that the Scottish Executive has committed an additional investment of £2 million over three years to increase the engagement of SMEs in the programme.
- Scotland also has many other initiatives of direct or tangential relevance, including "Healthy Return", "Pathways to Work", "New Deal", "Access to Work", "Modern Apprenticeship", "Business Gateway" and "Skillseekers". The quality and details of OSH provision here varies, but can be plentiful: see for example, Scottish Enterprise's guidance and questionnaires for its Modern Apprenticeships scheme²⁴. The guidance lists HSE publications in eight areas: general legal requirements; risk assessment; supervision; training; OSH arrangements for training placements; accidents and emergencies; PPE and welfare; and

 $^{^{23}}$ www.healthscotland.org.uk/hwl/about_shaw.cfm 24 "Health and safety questionnaire", SEN HSQ1, www.scottish-enterprise.com/modernapprenticeships.

miscellaneous. Again, the central question here is just how useful is this quidance?

- Business Gateway an economic development initiative in Scotland is a partnership comprising Scottish Enterprise, the Scottish Executive and local authorities.²⁵ It offers health and safety advice, but it is restricted to basic information with links²⁶.
- Wales has "Health Challenge Wales" a health and well-being initiative, but a search of its website failed to reveal information on SMEs. The indications are that Wales is not as well developed as Scotland in terms of OSH provision for SMEs, and it might be that Wales offers a good opportunity for the Inquiry to pilot one or more of any recommendations that it might make.

5.2.3. EU

At a European level, the then Article 118a(2) of the Treaty of Rome, which established the legal basis for most of the health and safety Directives from 1989 onwards, provides that the Council of Ministers "shall adopt by means of Directives, minimum requirements for gradual implementation, having regard to the conditions and technical rules obtaining in each of the Member States', and avoiding 'imposing administrative, financial and legal constraints in a way which would hold back the creation and development of small and medium-sized undertakings".

 $^{^{25}}$ www.bgateway.com/bg-about-us 26 www.bgateway.com/bg-home/bg-health-safety-and-premises/bg-health-and-safety/bg-health-and-safety-

The European Commission has highlighted SMEs in previous work strategies; and they are arguably more prominent in its new strategy²⁷ (see box).

EU SAFETY STRATEGY 2007-2012

The Commission's new strategy urges member states to ensure their own strategies give priority to instruments that guarantee a high level of compliance, particularly in SMEs and high-risk sectors. These measures include: dissemination of good practice at local level; training workers; development of simple tools to facilitate risk assessment; distribution of information and guidelines that are easy to use; better dissemination of information and access to counselling services; access to external, high quality and affordable prevention services (the Commission may consider the need for a recommendation inviting member states to facilitate access to such services); "involvement of labour inspectors as intermediaries to promote better SME compliance with legislation, "primarily through education, persuasion and encouragement, then, where necessary, through coercive measures"; and economic incentives at EU and national levels for micro-enterprises and SMEs.

The economic incentives "could include a possible reduction in social contributions or insurance premiums depending on the investment made in improving the working environment and/or reducing accidents; economic aid for the introduction of health and safety management schemes; introduction of health and safety requirements into procedures for the award of public contracts."

The strategy also envisages that the European Agency for Health and Safety at Work will ensure that its efforts to raise awareness and promote and disseminate best practice focus to a greater degree on SMEs. The Commission's advisory committee will continue to identify the areas for which good practice guides are necessary and also make them easier for SMEs to understand.

²⁷ "Communication from the Commission to the Council and the European Parliament: Improving quality and productivity at work: Community strategy 2007–2012 on health and safety at work", COM(2007) 62. The commission formally presented its strategy to EU ministers at the Employment, Social Policy, Health and Consumer Affairs (EPSCO) Council meeting on 22 February 2007; the council should formally approve the strategy at its meeting on 30 and 31 May 2007.

5.3. OFFICIAL - NON-OSH, NON-SME SPECIALIST

5.3.1. Government

HSE activity takes part in an increasingly intrusive political environment. This comprises: a great deal of activity aimed at helping SMEs; wider health initiatives; and emphasis on rehabilitation, absence management and disability. All this is occurring within a climate of deregulation or better regulation (Hampton, Macrory etc), much of the impetus for which is to encourage SMEs. The Hampton report, for example, 28 noted that small businesses are hit hardest by regulation, often considering it a hindrance to economic growth. Particular government initiatives around SMEs include the framework, *Small business and government: the way forward* (December 2002) and *The government action plan for small business* (January 2004).

Government departments and agencies are involved in awareness raising activities, enforcement, procurement and the contractor supply chain.

Departments include the DTI, DWP, DH and the Treasury. The 2006 National Audit Office report noted that the Government had identified 15 departments with 265 programmes for small businesses; the March 2006 budget stated that the Government would reduce the number of national, regional and local support programmes from over 3,000 to 100.

5.3.2. Fire authorities

Fire authorities are increasingly providing advice to employers, including SMEs.

²⁸ "Reducing administrative burdens: effective inspection and enforcement (final report)", Philip Hampton, March 2005, HM Treasury, ISBN 1 84532 088 3, www.hm-treasury.gov.uk/hampton. Enquiries about the report: Sowdamini Kadambari, tel: 020 7270 4674 email: hamptonreview@hm-treasury.gov.uk.

Although sites looked at for this mapping do not specify SMEs, many of the services they provide will be relevant. For example, the London Fire Brigade²⁹ has pages specifically for employers with advice on fire safety training (fire awareness, extinguisher training, fire warden, fire risk assessment, fire security, hotel staff, bus and coach operators), the Fire Safety Order, emergency plans, employees, asbestos reporting and automatic fire alarms. The Brigade was also developing a fire risk assessment course for offices, small retail and similar premises. This was supposed to be operational from June 2006³⁰. Many of the courses looked at are relatively cheap and of short duration. This, combined with the fact that SMEs may well have some contact with fire brigades, merits further investigation by the Inquiry. Fire authorities also deal with SMEs in their capacity as clients (see box).

Fire authorities as client

Fire authorities also deal with SMEs as a client. The London Fire and Emergency Planning Authority, for example, explicitly considered SMEs and Rethinking construction when selecting contractors itself³¹. Interestingly, OSH is not mentioned as an issue: "Central government is strongly encouraging public sector clients within the construction industry to move away from using traditional forms of procurement and adopt longer term relationships working in partnership with their supply chain with better opportunities for continuous improvement. The Local Government Task Force is keen to promote the use of framework agreements as a way of adopting the principles of Rethinking Construction Officers have been considering how to address the Rethinking construction initiative as an alternative procurement route to reduce the

²⁹ www.london-fire.gov.uk/fire_safety/at_work/at_work.asp.

³⁰ Awaiting confirmation from LFB's commercial training unit: ctu@london-fire.gov.uk.
³¹ "Future procurement of redecoration work", report by head of property to 26 November 2006 meeting of London Fire and Emergency Planning Authority's finance, procurement and property committee, doc: FEP

amount of time and external resources currently involved with procuring redecoration work. It is proposed to establish a framework agreement as a pilot programme, which will eliminate around 20 - 25 individual redecoration tender exercises each year. This would allow better use of resources by focusing on tasks that add value such as monitoring the contractor's performance and auditing the quality of work on site ... Clients can ensure that by structuring the framework package appropriately there are opportunities for SMEs both directly and through the supply chain. SME opportunities have been found to increase when contracts have incorporated lower value work bands and when a number of contractors are appointed to the framework in order to spread the opportunities more widely. Framework agendas are driven by shared commitments to service quality, performance improvement, technical innovation, waste exclusion economy and responsibility."

5.3.3. Employment service

Job Centre Plus issues questionnaires for employers on OSH; these cover core OSH issues (policy, risk assessment, training, competence etc), but are hard to locate, as is information on OSH generally on its site³². The OSH details are similarly timid within New Deal advice³³, but employers are told that there are benefits on offer, including advice and up to £750 for training (although OSH is not mentioned in this context).

 $^{^{32}}$ www.jobcentreplus.gov.uk/JCP 33 www.jobcentreplus.gov.uk/JCP/Employers/Ourservices/Programmes/New_Deal/index.html

5.4. ORGANISATIONS FOR SMES

5.4.1. Business Link

Business Link offers comprehensive OSH advice, usually with links to related HSE publications³⁴, as well as to the SME Indicator. The OSH advice is wideranging, including COMAH sites and the provision of information to the public³⁵. Business Link also allows business to obtain personalised checklists of relevant regulations, licences and permits.

Business Link has a network of 42 operators providing advice to small businesses in England, as well as the businesslink, gov portal. In 2004, Business Link assisted 492,000 businesses (a 14% penetration rate). It also helped 172,000 pre-starts (making the overall penetration rate 37%).

The HSE's paper on the business involvement programme notes that the "Your type of business theme on businesslink.gov.uk provides a unique resource to owners of new and established SMEs", offering a list of regulations and licences that apply to their business, "personalised by business sector and location", as well as links to trade bodies and other organisations.

The local business links appear to have high penetration of SMEs: Business Link for London, for example, reached over 90,000 businesses and entrepreneurs in 2005. Some local links provide services such as a three-day "Road to Safety" course in Devon and Cornwall (£300)³⁶. All local sites looked at as part of this

www.businesslink.gov.uk/bdotg/action/detail?type=RESOURCES&itemId=1074417859&r.s=sl www.bldc.co.uk/

 $^{^{34}}$ www.businesslink.gov.uk/bdotg/action/layer?topicId=1073858799&r.s=tl see, for example,

mapping exercise provide briefings and information (mainly from the national site) and signposting. Devon and Cornwall's "Information Briefing" on health and safety is short (three pages), covering eight areas: policy, staff organisation, planning, performance measurement, learning from experience, assessing risks, action plans, prioritising and further help³⁷. It is not clear how helpful SMEs might find this advice.

The Government's 2002 small business strategy refers to a Business Link University, which is describes as a resource provider. This does not, however, appear to be running, although there is a guide from Business Link to how employers can make the most of what universities offer³⁸.

5.4.2. The Small Business Service

The Small Business Service (SBS), which is an agency of the DTI, potentially addresses OSH to an extent as part of Business Health Check services. The checks advise they use "a qualitative assessment using the EFQM Excellence Model and a quantitative benchmark using the DTI Benchmark Index and Wave Innovation Snapshot". Analysis of "case studies" of checks do not reveal OSH as an element³⁹. The OSH information on its web site concentrates on input into government initiatives, such as common commencement dates for legislation.

The NAO notes that the SBS has moved from being a deliverer of services to influencing government. The group's current focus is the simplification of

³⁷ www.blinkdandc.com/legal/555_3330.asp

³⁸ "Work with UK universities and colleges",

www.businesslink.gov.uk/bdotg/action/layer?topicId=1074415859&r.s=sl

³⁹ see, for example, ICS Computing Ltd case study and Northern Ireland: www.investni.com/index/develop/dv-invest-in-capability/strategic excellence/businesshealthcheck.htm

business support programmes.

The SBS identifies seven priorities for small businesses: better regulation; better access to finance; more effective business support; less government bureaucracy; clear communication and information from government; a favourable tax regime; and a more skilled workforce. Clearly, OSH needs will fit into at least four of these areas.

5.4.3. SME representatives

- The Federation of Small Businesses (FSB) is the largest organisation in the UK representing the interests of small businesses, with over 200,000 members. The FSB has a health and safety policy committee, which is primarily a lobbying body and works closely with the FSB's national policy unit in London. FSB members have access to a 24-hour legal advice line that provides tailored advice on health and safety issues and is linked to a website with access to advisers over email 40.
- The Forum of Private Business offers a Health and Safety Guide⁴¹ at £90 annual subscription for members (£180 non-members). This contains general and sector-specific guidance, risk assessment forms and, the FPB claims, a "comply-as-you-complete" guide.
- The Institute of Directors 42 offers two four-page "Directors' briefings", on OSH and risk assessment, as well as policy papers on issues such as smoking and alcohol and drugs. It also publishes occasional books, most recently on Health

⁴⁰ www.fsb.org.uk/data/default.asp?ID=278&loc=policy

www.isb.org.dx/data/delidati.dsp.iis 2.55335 ps.iis,
www.fpb.org/cyk484NoExBptA.html
42 www.iod.com/is-bin/INTERSHOP.enfinity/eCS/Store/en/-/GBP/IODContentManager-Start;sid=S2LwgzmYk2HKC3w2czj6FZFY2RKDJWreMM8=?ChannellD=2&MenuID=17&TemplateName=po licy%2fcontent%2fregulation%2fpol regulation%2eisml

and Well-being. The OSH briefing covers eight core areas: directors' responsibilities; policy; personnel, fire precautions; hazards; employee welfare; accidents and emergencies; and help and support. The risk assessment briefing covers: the process; accidents; hazards; longer-term health risks; existing precautions; improving safety; paperwork; and help and advice.

• The CBI⁴³ offers a reasonable amount of OSH information, although most of it is policy or news-based, rather than practical advice for SMEs, or about CBI groups and its benchmarking tool, "Contour".

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5.5. TRADE ASSOCIATIONS

Many trade associations provide OSH services and advice to SME members. notably the EEF, FMB, BPIF, BRIF, CC, ECA, CIA and ECIA (see also the trade associations in the Association of British Insurers' "Making the Market Work" below). Penetration into SMEs varies. Examples include:

- The EEF offers an OSH benchmarking tool⁴⁴ as well as information on OSH topics.
- The Electrical Contractors' Association (ECA) offers "Technical audit", "Installation Inspection" and "Technical Health Check" services, as well as an NVQ level 3 scheme⁴⁵. It also has OSH pages aimed at smaller businesses⁴⁶. The ECA has direct access to over 2,500 SMEs and micro-firms. Through a construction umbrella group, "SEC", it has access to many more.
- At a European level, Cefic (the European Chemical Industry Council) has recently completed a major review of "what works" in terms of helping SMEs to use chemicals safely⁴⁷.
- The British Safety Industry Federation (BSIF)⁴⁸ is the safety industry's largest trade body. It has 160 members (manufacturers, distributors, test houses, certification bodies and safety professionals). It also has links to 160 trade bodies. It claims that one of its aims is to assist companies to comply with OSH regulations. The BSIF's initiatives to assist the safety industry by identifying

www.eef.org.uk/eef/ohskpi/
www.eca.co.uk/SupportServices/services.asp
www.eca.co.uk/IndustryGuidance/HealthAndSafety/index.asp?search=SME
www.cefic.be or hfidderman@mac.com
www.bsif.co.uk/index.asp

quality supply include: codes of practice specifying minimum requirements for many BSIF associations; the use of the "BSIF Member Company" logo on company literature and products; Quality Mark schemes, which assess the training provided by member companies; and a level three qualification for suppliers' customer service staff, the *BSIF Safe Supply Certificate*.

On 23 January 2007, the BSIF launched an Accredited Supplier scheme⁴⁹ "to allow companies that are not directly involved in the safety industry supply-chain but, nevertheless, have a significant impact on the ways in which safety specific organisations interact with the market". Three companies have gained this status: Flint Insurance, Rilewood Associates and PPE Consulting. The latter two are recruitment companies, with the schemes' focusing on human resources. The first scheme, SafeSure, "offers substantial savings in policy premiums, often with enhanced cover", claims the BSIF. This is achieved by "helping insurance companies understand the real liability risks involved in the Safety market. The Zurich, Norwich Union, Axa plus a number of other major insurers are involved. [There are also] excellent premiums on other insurance needs at service levels BSIF have assessed and accredited."

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⁴⁹ www.bsif.co.uk/index.asp?menucopy=&maincopy=newsview&detail=77

5.6. FINANCIAL SERVICES

5.6.1. Banks

Some banks provide OSH as part of general business start up advice to SMEs.

These vary in scope and can be free or priced. Examples include:

- Barclays offers a *Small Business Start-up* guide⁵⁰, but the amount of OSH information is unclear. A search of its site for OSH information, however, raised only security advice.
- NatWest offers a *Monitor Health and Safety Service*⁵¹ for an unspecified fixed monthly rate. This comprises a bespoke on-site audit of OSH compliance, action points, a "personalised Health & Safety Guidance System" that details management responsibilities, personalised employee handbook with OSH policies and procedures, a free place on a NatWest OSH training course, access to a specialist advisory team on a 24/7 basis, legal costs in the event of prosecution, insurance indemnity and, in the event of an incident, a Mentor specialist will be "on hand" to help the SME's management with the investigation, liaise with the enforcing authority and help with the completion of any reports. NatWest would not advise whether the advice was in-house or contract. SMEs can combine the OSH service with an employment law service.

 $www.natwest.com/business02.asp?id=BUSINESS/BUSINESS_GUIDES/RUNNING_YOUR_BUSINESS/HEALTH_SAFETY$

⁵⁰ www.barclaysmicrosites.co.uk/start_up/landing_eggs.html?WT.ac=coukhelpsmbus. Copy awaited.

 HSBC offers a business start up service, which has OSH pages providing free essential information and further contacts such as LAs, the HSE and trade associations⁵².

5.6.3. Insurance

In addition to providing Employers' Liability (EL) and other types of insurance, insurers and brokers also provide OSH surveys/services/training and engineering inspection linked to bodies such as SAFed.

The Association of British Insurers' (ABI) initiative, Making the market work⁵³, offers guidance to trade associations and other trade bodies about the types of best practice that EL insurers would like to see firms adopt. The ABI states: "It is important to stress that the ABI is not proposing to set up an accreditation system for trade bodies' health and safety schemes. There is no pass or fail." An ABI standing committee assesses each scheme submitted by a trade body against criteria. The main purpose of the initiative was to improve the functioning of the employers' liability insurance market. The criteria are that: a trade association should have a membership in a defined sector and require members to belong to its OSH scheme; membership of an association should require meeting of a recognised OSH standard (such as HSG65 or HSAS 1801); schemes should incorporate a formal tool for associations to assess members' OSH management and practice; associations should provide or facilitate access to OSH training; firms should collect OSH statistics. The ABI provides a simple questionnaire covering these five criteria. To date, 15 organisations have been assessed under

 $^{^{52}}$ www.knowledge.hsbc.co.uk/go.asp?/.website.container/bHKC001/&page=LA3 53 www.abi.org.uk/Display/File/364/ABI_A4_HealthSafety2.2.pdf],

Making the market work: the British Printing Industry Federation; National Federation of Roofing Contractors: British Coatings Federation: British Furniture Manufacturers; Federation of Piling Specialists; British Aerosol Manufacturers' Association: Federation of Small Businesses: National House Building Council: British Chemical Distributors' and Traders' Association; Chemical Industries' Association; British Constructional Steelwork Association; Construction Employers' Federation; Heating and Ventilating Contractors Association; Retread Manufacturers Association; SELECT (Scottish Electrical Contractors); and Employers in Voluntary Housing.

One issue that the Inquiry might want to call evidence on is the extent to which insurers are adjusting premiums to reflect OSH initiatives. A survey by the EEF of 800 manufacturers in 2004 showed that of 25% had externally verified OSH management systems, but that these had had no impact on premiums in 80% of cases⁵⁴.

The Safety Assessment Federation (SAFed)⁵⁵ represents the UK independent engineering inspection and certification industry, and "acts as a focal point for all issues and concerns relating to the statutory inspection and certification, safe use and operation of plant, machinery and equipment". The SAFed Health and Safety Passport scheme⁵⁶ has been running since March 2004 and comprises 17 modules of core safety and industry-specific modules (construction, quarries, manufacture, woodworking, metal work etc).

 ^{54 &}quot;Employers' liability insurance: EEF 2004 survey of insurance costs", www.eef.org.
 55 www.safed.co.uk/
 56 www.safed.co.uk/Help/guide_1.htm

5.7. EMPLOYEE ORGANISATIONS AND INVOLVEMENT

Most trades unions provide some degree of OSH service to their members. Some, however, have gone on to provide some degree of training to employers (GMB, TGWU, Amicus and UNISON). Penetration to SMEs varies. The Inquiry might want to call for evidence from some of these unions on the extent and types of training they have offered to SMEs.

5.7.1. WSAs

• One of the more interesting initiatives here is the Workers' Safety Adviser (WSA) initiative. Unfortunately, the HSC decided in November 2006 to wind up the WSA Challenge Fund from April 2007. The three-year pilot saw £2.7 million from the government invested over three years into partnerships – including trade unions and employers' groups – that tested innovative ways to encourage worker involvement in OSH in SMEs, with advisers visiting companies. The fund involved 25 projects, 73 partners, 47 WSAs, 3,185 SMEs and 60,000 workers. Stuart Bristow, the HSE's worker involvement programme manager, said that "the fund did a good job, but the world has moved on. We now have Workplace Health Connect and other things, so a stand-alone project like the WSA challenge fund is not helpful."⁵⁷ An HSE-commissioned evaluation of the first of the three rounds of projects concluded they had improved worker involvement and OSH management – "typically more risk assessment, training, health and safety policies and better health and safety management arrangements." But it

⁵⁷ "Health and Safety Bulletin" 355 p.5.

⁵⁸ "WSA Challenge Fund evaluation: round one, overview report", Greenstreet Berman, www.wsa-cf.org/resources.

also found that it was "uneconomic" and would require almost £2 million a year over 10 years to reach 10% of SMEs (5-49 employees). There was not, however. a proper evaluation of the costs of other schemes. The Inquiry should note. however, that the WSAs did have a positive impact on working conditions in SMEs. Professor Stephen Wood, chair of the fund's management board, claimed the project had been a success: "It reached parts that others don't reach, such as repair shops and small recycling outfits." Nor is there a clear consensus as to what the HSE should do next, although it intends "mainstreaming" the lessons of WSAs into its work⁵⁹.

5.7.2. Worker involvement programme

The HSC/E are looking at ways of improving worker involvement in OSH. A 2006 consultation document proposed one or more (minor) legislative changes, improved guidance and measures to encourage employers. Following its analysis of the consultation responses, the HSE put a paper to the HSC meeting on 15 March 2007 on future worker involvement priorities⁶⁰. This noted that: "The consultation has not given us a basis for recommending significant change in our approach. There is support amongst all stakeholders for the principles of worker involvement but there is significant disagreement about how best to encourage it." The HSE recommended: improved guidance for safety reps; "mainstreaming" involvement, particularly in the construction and public sectors and with HSE and LA staff; and working with "others" to encourage worker involvement,

⁵⁹ "Worker involvement: proposals on the future of the WSA initiative and first findings from the consultation exercise", HUSK/06/88, www.hse.gov.uk/aboutus/hsc/meetings/2006/071106/c88.pdf.

work"", HSC/07/12, www.hse.gov.uk/aboutus/hsc/meetings

particularly around health issues and safety representatives. The HSE's paper recognises that SMEs can present a particular problem for worker involvement issues and that generic guidance may not be helpful (it also points out that the HSE has produced a case study specifically for SMEs).

5.7.4. Specific projects

The Inquiry might want to call evidence from specific projects that have engaged workers in SMEs. For example, the UCATT-Bovis Lend Lease Ltd five year project at Manchester Royal Infirmary, which is involving up to 900 on-site workers from 60–70 contractors. Running since 2005, the early indications in behavioural change and injury reduction are encouraging⁶¹.

5.7.5 Migrant workers

• The Inquiry might want to look at the implications of migrant and non-English speaking labour, many of whom work in SMEs. The HSE produces some important information in 20 or so languages⁶², and its Infoline service offers an interpreting facility. Most recently, it launched information in Polish. NOSHC might also want in its evidence gathering to look at organisations representing minority groups as well as what other bodies, such as unions and trade bodies, are doing. Research published in October 2006 found that migrant workers may be suffering higher levels of accident rates than non-migrant workers and that

 $^{^{61}}$ www.hse.gov.uk/construction/engagement/bovis.pdf 62 www.hse.gov.uk/languages/index.htm.

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this is probably linked to their working long hours and having a limited understanding of health and safety⁶³.

⁶³ "Health and safety and migrant workers in England and Wales", HSE research report 502, London Metropolitan University, www .hse.gov.uk/research/rrhtm/rr502.htm.

5.8. TRAINING ORGANISATIONS, AWARDS BODIES

5.8.1. Learning and Skills Council/Sector Skills Councils

The Learning and Skills Council (LSC) has a Safe Learner Framework within which LSC-funded providers have to undertake OSH assurance of placements. This involves scrutiny of placements in up to one million businesses annually against LSC OSH standards. The LSC has a one-stop shop for OSH information⁶⁴, and has published OSH standards to help colleges and other providers and employers⁶⁵. The LSC agreed with the HSE and government the procurement standard for providers to use. It comprises nine core standards (and a tenth specific to the learner) that reflect basic law and OSH management, for example policy, risk assessment. The LSC advises that where employers do not meet all the standards, "the assessor should signpost the employer to appropriate sources of advice and assistance. In most cases, the assessor will agree and action or development plant with the employer to help achieve the standards. The LSC has a huge outreach, but the Inquiry might want to determine the degree of duplication.

In October 2002 the Department for Education and Skills launched Skills for Business Network, which is a UK-wide network of employer-led Sector Skills Councils (SSCs), supported and directed by the Sector Skills Development Agency⁶⁶. The councils are charged with developing workforce skills and building

⁶⁶ www.ssda.org.uk

⁶⁴ LSC information: www.safelearner.info/

^{65 &}quot;Standards for health and safety", Learning Skills Council, February 2006, www.lsc.gov.uk/NR/rdonlyres/el4r6timmtckbdalca643dsbrlxlhvw36fuugqjcfvundnb6kwus4j64pn7nhigvnrzzvl 2mkerucd/HealthandSafetyRequirements.pdf

effective employer networks. There are currently 20 such councils. An example of the sorts of qualification agreements that involve OSH can be found in the food and drink manufacturing sector⁶⁷.

An example of a council, LANTRA⁶⁸ (the council for the environmental and landbased sector) works to improve the level of skills and business performance in companies across 17 industries that comprise the sector in the UK. It covers 230,000 - mainly smaller - businesses and 1.5 million workers. It provides links to information on National Occupational Standards. Access to OSH information is not easy from its site.

On 5 December 2006, the Government published Sandy Leitch's review of the UK's long-term skills needs (up to 2020)⁶⁹. This concluded that the UK must urgently raise achievements at all levels of skills (see box).

THE LEITCH REVIEW

Leitch's recommendations included:

- increasing skill attainments at all levels:
- · routing public funding of vocational skills through Train to Gain and Learner Accounts;
- strengthening the employer voice on skills through a new Commission for Employment & Skills, increasing employer engagement and investment in skills, reforming Sector Skills Councils in order to simplify and approve vocational training;
- launching a "pledge" for employers voluntarily to train more employees at work (with a statutory right of employee access to workplace training should progress by 2010 prove unsatisfactory);

www.ssda.org.uk/ssda/default.aspx?page=2655
 www.lantra.co.uk/
 "Prosperity for all in the global economy – world class skills", www.hmtreasury.gov.uk./independent reviews/leitch review/review leitch index.cfm

- increasing employer investment in higher level qualifications, especially in apprenticeships and in degree and postgraduate levels;
- raising people's aspirations and awareness of the value of skills, creating a new universal adult careers service to diagnose skill needs with a skills health check available for all;
- the government should introduce compulsory education or workplace training up to the age of 18; and
- integrating the public employment and skills services to deliver sustainable employment, with the development of an employer-led Employment and Skills Board.

5.8.2. Construction initiatives

The Construction Industry Training Board (CITB) offers a large amount of OSH activity⁷⁰ including an "test" of minimum OSH awareness that is taken by 300.000 workers annually; a training framework (Site Safety Plus). The CITB's experiences, as well as those of the National Construction College⁷¹, make it an important witness for the NOSHC Inquiry, inside and outside of the construction sector. The CITB is also a partner in Construction Skills (the sector skills council for construction⁷².

The Major Contractors Group currently approves 22 card certification schemes⁷³. such as the Construction Skills Register (CSR), Construction Skills Certification Scheme (CSCS) and affiliated schemes such as ECS, Construction Plant Competence Scheme (CPCS), the Scottish Construction Registration Executive (SCORE), and the Engineering Services SKILLcard.

⁷⁰ www.citb-constructionskills.co.uk/healthsafety/

www.citb-constructionskills.co.uk/traininglearning/nationalconstructioncollege/ www.constructionskills.net/aboutus/

⁷³ www.citb-constructionskills.co.uk/cardschemes/whatcardschemesareavailable/

5.8.3 Other initiatives

Schools are involved – to varying extents – in scrutiny of placements for work experience students. The HSE offers guidance for employers providing work experience, The right start. Work experience for young people: Health and safety basics for employers⁷⁴. This covers basic information, with advice on the work placement officer. In November 2006, the EEF, Caterpillar and the Department for Education and Skills launched a web-based guide to promote safe site visits for schools and other educational establishments⁷⁵.

ENTO⁷⁶ has a new Stand-Alone Unit, Supervise the Health, Safety and Welfare of a Learner in the Workplace

Vocational qualifications (VQs)⁷⁷ are accredited into the national qualifications framework for almost every industry sector and every level of the framework. The qualification can be wide-ranging or sector-specific and are offered by a large number of awarding bodies. NVQs are based on national occupational standards and are achieved through assessment and training. The Qualifications and Curriculum Authority (QCA) also provides advice for schools on placing students. which refers to OSH⁷⁸.

Established in 1995, the Small Firms Development Initiative (SFEDI)⁷⁹ is an independent body that aims to raise the standard of learning, training, coaching and business support available to prospective and existing small and home

⁷⁴ www.hse.gov.uk/pubns/indg364.pdf
75 www.safevisits.org.uk
76 www.ento.co.uk/projects/dev_hs_standalone/latest.php
77 www.qca.org.uk/8273.html
78 www.qca.org.uk/14-19/6th-form-schools/68_193.htm
79 www.sfedi.co.uk/.

business owners. Its strategic plan for 2007-2010 lists six objectives, all of which may be relevant to the Inquiry: to underpin SFEDI business enterprise standards and good practice with internationally proven and SFEDI-endorsed learning media; to ensure that all those providing small and home business owners with business/learning and skills support can meet SFEDI and ENTO standards; to ensure by April 2008 that all SFEDI regional and national licensed centres are able to develop, assess and award all the roles important to small business owner success; to reach the limit of 100 SFEDI centres of excellence to continue to set business enterprise and business support standards and associated qualifications strategies; to raise the quality of the learning and skills offer to all those exploring or running business enterprise; and to become the leading UK advocate of how to meet the learning and skills needs of prospective and existing self employed and small and home business owners, which will in turn assist government officials to produce workable, accessible and useable policies, programmes and support initiatives. The standards are part of the Framework of National Occupational Standards, including LG3 on health and safety⁸⁰. Investors in People⁸¹ includes OSH management review as part of investors' status, but the site is poor and off-putting to use in terms of OSH information.

The Inquiry may wish to look at the access to SMEs and opportunities that local colleges may offer. For example, research published in 2005 into hairdressers⁸² – all of which are SMEs – found that face-to-face interventions from an inspector

^{*}Develop procedures to control risks to health and safety", LG3, www.sfedi.co.uk/standards/2006/LG3.
**Www.investorsinpeople.co.uk/IIP/Web/Homepage1.htm

^{**}Making an impact on SME compliance behaviour: an evaluation of the effect of interventions upon compliance with health and safety legislation in SMEs", HSE RR 366, Kings College London, 2005, ISBN 0-7176-6143-1, HSE Books or free at www.hse.gov.uk//research/rrhtm/rr668.htm,.

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or a local college [work placement] – providing they are backed up by power – "are the most effective at all stages in the process". Advisory visits by LA inspectors following an inspection, were particularly effective. But the compliance effect of formal enforcement activity was limited to the company being inspected. Information from LAs was too complicated, irrelevant, too long, or misunderstood. Trade association information, however, was useful. LA training courses on OSH were good, but motivating hairdressers to attend was difficult.

5.9. SPECIALIST OSH PROVIDERS

5.9.1. Occupational health providers

There are numerous OH providers, from private contractors to NHS Plus. In Scotland, there is commercial provision in a number of NHS Board areas by both NHS Scotland and private-sector suppliers (includes technical, management and policy advice, training and rehabilitation). Again, penetration to SMEs varies.

NHS Plus⁸³ is a network of around 100 NHS occupational health (OH) departments across England, supplying services to NHS staff and also to non-NHS employers, with a focus on SMEs. The service concentrates on health. rather than safety, and can offer⁸⁴: occupational health needs assessment; risk assessment; pre-employment assessment and screening; health surveillance; immunisation; procedures (such as audiometry and vision screening); medical advice; counselling; drug and alcohol screening; training (including on health and safety, manual handling and first aid; insurance medicals; industrial injury assessments; ergonomic advice; and life style advice and health promotion). NHS Plus offers four case studies of costs in organisations employing 20, 60, 150 and 400 people. NHS Plus also offers free online advice on employers' responsibilities, legislation, risk assessment and violence⁸⁵. In July 2006, the government gave NHS Plus £10 million to set up 12 good practice pilots⁸⁶.

www.nhsplus.nhs.uk/
 www.nhsplus.nhs.uk/miscpages/about.asp
 www.nhsplus.nhs.uk/employers/employers_health.asp
 "Workplace Health Connect: July 2006 progress report", Institute for Employment Studies, www.hse.gov.uk.

5.9.2. Independent consultants

The Independent Safety Consultants Association (ISCA)⁸⁷ comprises 19 organisations with 300-400 consultants (Bee Safe Ltd, BPS Solutions Ltd, Citation plc, Cooper Safety Associates Ltd, Croner Consulting, Gainas Safety Consultants, HASTAM, The Health & Safety People, JNC Safety Services, MSK Associates, pcm Safety Management Ltd, Quantum Risk Management, R G Wilbrey (Consultants) Ltd. RSK-ENSR, Shires Safety Consultants, Site Safety Services, TAA Health & Safety Consultancy, Waterman Health & Safety and White Young Green).

They offer services across the OSH spectrum, including risk assessments, technical surveys, accident investigations and training. Many will also be on accredited consultants' lists of OSH professional bodies. ISCA uses OHSAS 18001 as the OSH management system against which it checks compliance.

SHEMS ONLINE

SHEMS Online (Safety, Health and Environmental Management System)88 is run by RSK Group Ltd, a consultancy (RSK ENSR Health & Safety UK - Health Safety Environmental Consultants)89. The group includes Health and Safety Ltd, which lists as clients Network Rail, UKAEA, Environment Agency, Home Office, National Grid Transco, GlaxoSmithKline, SecondSite Property (BG), Dulwich College, Royal Holloway College, George Wimpey and Wates Developments. SHEMS offers three levels of consultancy, starting with health and safety checkup (£500), which involves an audit and check of legal compliance of an organisation's OSH systems and procedures, and an "action plan plus a no obligation quote to provide implementation assistance". A second tier - "Action plan implementation - (from £750) offers

www.isca.org.uk/
 www.shemsonline.co.uk/SHEMS+Links/150.aspx
 www.safety-advice.co.uk/about_us/about_us.aspx

consultancy support to develop best practice health and safety systems. A third level of "Website, support and updates" (£125 per month) is less likely to be attractive to SMEs. SHEMS also offers an online small business forum, although there had been just four messages posted at 28 January 2007.

The October 2006 meeting of the HSC's Small Business Trade Association

Forum⁹⁰ discussed whether SMEs are satisfied with the help they receive from external OSH providers. An HSE paper noted that inspectors come across bad (usually wrong) and poor advice (paperwork, inconsequential risks), although much advice "may" be adequate. The meeting, however, stressed that "poor consultancy advice is a significant problem faced by small business". Reasons include: many consultants provide risk assessment leaflets rather than "the simple, practical, workplace focused advice that small businesses require".

Further, small businesses cannot identify a competent consultant, basing their choice solely on qualifications, rather than competence in applying the knowledge within a specific industry.

Members felt that a draft HSE/IOSH statement would not be helpful to SMEs; it was too general and did not provide the practical advice that SMEs needed, although there was "some useful material, such as the reference to the fact that small businesses are often able to provide sufficient health and safety advice from within their own ranks". Members also agreed that SMEs relate best to sector specific practical examples (with the construction sector cited as an exemplar).

⁹⁰ Minutes of the meeting of the Small Business Trade Association Forum, 18 October 2006, www.hse.gov.uk/aboutus/hsc/iacs/sbtaf/index.htm. The HSE paper and draft statement is at the same address.

5.9.3.OSH organisations

RoSPA⁹¹ and the British Safety Council (BSC) market services and awards. RoSPA offers services such as the RoSPA Health and Safety Review⁹², which involves a RoSPA consultant and is designed for managers responsible for OSH in SMEs, and Quality Safety Audit, which is based on HSG65 and BS8800 (including OHSAS 18001)93.

RoSPA also offers an advice pack for smaller firms, which comprises 10 sheets on elements of OSH. There are some 70 local safety groups linked to Safety Groups UK⁹⁴ and affiliated to RoSPA. The groups provide a local forum for meetings, networking and cooperation between employers, inspectors and unions. Safety Groups UK⁹⁵ has a formal partnership agreement with HSE that, among other things, commits groups to focus on HSE priority themes and to extend their outreach to SMEs in their localities.

The BSC claims it has "many" SMEs among its membership, offers three levels of OSH qualifications and courses, as well as courses in areas such as risk assessment, DSE, fire and manual handling. In November 2006, it previewed a QCA-accredited, entry level 3 award on the National Qualifications Framework on young persons entering work⁹⁶. The initiative was developed by the HSE, IOSH and BSC.

⁹¹ www.rospa.com/audit/index.htm)
92 www.rospa.com/audit/hsr/index.htm

⁹³ www.rospa.com/audit/qsa/index.htm

⁹⁴ www.safetygroupsuk.org.uk 95 www.safetygroupsuk.org.uk

⁹⁶ ww.britishsafetycouncil.co.uk/pages/about_us/latest_news/20061113_youngworkers.html

The Inquiry might want to ask how many SMEs use, or are members of, RoSPA and the BSC; their membership appears heavily weighted towards larger organisations in the public, private and (to some extent) voluntary sectors. The outreach of groups to SMEs varies but groups also involve many OSH professionals who tend to work in larger businesses or who are consultants. IOSH offers two free tools to SMEs: safestartup.org⁹⁷ and a risk management toolkit⁹⁸. Safestartup.org is an initiative with the HSE, Norwich Union and Small Business Service. It takes the SME through a series of "rooms" covering basic OSH and insurance information. The IOSH membership now exceeds 28,000; the extent to which its technical membership will be able to assist SMEs is an area that will need to be discussed with IOSH.

5.9.4. First-aid organisations

The British Red Cross⁹⁹ claims it is the world's largest first-aid training provider, training 130,000 people every year. It does not offer an analysis of the sizes of organisations from which its employees come, but anecdotal evidence from St John – another trainer – indicates that there is considerable permeation into SMEs, and that this is partly attributable to a recognition among SMEs that there is a legal requirement about first aid, combined with brand recognition, with a possible contributory factor being that employers and trainees see the knowledge as more useful than other forms of OSH training:

www.redcrossfirstaidtraining.co.uk/.

97 www.safestartup.org/
98 www.iosh.co.uk/index.cfm?go=technical.details&scid=13
99 www.redcrossfirstaidtraining.co.uk/]

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St John Ambulance offers similar first-aid courses as well as OSH courses lasting between three hours and one day on moving and handling objects (three), risk assessment, IOSH working safely, IOSH managing safely, and fire marshals¹⁰⁰. Although these courses do not specify SMEs, their nature would indicate that SMEs are one target.

 $^{^{100}\,}www.sja.org.uk/training/courses/healthsafety/default.asp$

5.10. SUPPLY CHAINS

Supply chains and pre-qualification are an obvious source of influencing SMEs. There are a number of interesting initiatives here, including CHAS, Constructionline, Safecontractor and Achilles SMEs (see boxes). In a recent Electrical Contractors' Association survey of over 500 mechanical and electrical contractors – most of which were SMEs – on who is assessing them, around half were with CHAS or another scheme that is essentially the same as CHAS; Safecontractor covered 25%, and two of the Achilles schemes 12%¹⁰¹. The Inquiry might also want to look at what large companies have done on an individual basis.

CHAS

The Contractor Health and Safety assessment scheme (CHAS)¹⁰² is available to public and private sector organisations for shortlisting contractors, suppliers and consultants. It provides assessment criteria that safety professionals can use for the OSH element of a prequalification application. It is not an approved or select list of contractors. CHAS checks that a company appears compliant with important OSH law, although it is not "an assessment system that will make sure all companies are fully complying with every aspect [of OSH law]".

Although CHAS's main area is construction, it list 11,000 contractors in 124 work categories. Most "members" (the clients, as opposed to the contractors) are local authorities (150), but there are also 50 "miscellaneous", (including Royal Mail, Transport for London and BAE Systems); 33 universities; 26 major contractors, although MITIE companies account for six; 25 housing associations; six health services, of which two are evaluating CHAS; four fire services; and two prison services. The Association of London Government Health and Safety Forum licenses

www.chas.gov.uk

¹⁰¹ emails from Paul Reeve (ECA) to Charlotte Henderson (RoSPA), 21 December 2006 and Howard Fidderman (MAP report author) 26 January 2007

Merton Council as the CHAS administrator. CHAS is endorsed by the Local Government Association, TUC and IOSH.

The advantages of CHAS are that:

- members do not have to duplicate assessments OSH compliance in applications for companies that have already been assessed; and
- contractors do not have to undergo OSH assessments every time they apply to a CHAS member;
- it removes the "inconsistency where some contractors may be judged compliant by one employer but not others".

Although 80% of SME contractors fail their first assessment, a "fundamental principle" of the scheme is to help these companies to improve their safety management; the reassessment failure rate is 20%. "This system means member organisations provide significant help to small local businesses to improve their standards of health and safety compliance and management", advises CHAS.

An applicant contractor can apply for CHAS accreditation via a member or direct to CHAS. There are three stages:

- the assessment of the application. This will cover policy statement, OSH organisation, work equipment, training, consultation arrangements, first aid, fire and emergency procedures, display screen equipment, manual handling, COSHH, risk assessment, asbestos, health surveillance, accident reporting, work equipment, personal protective equipment, electrical safety, contractor management, workplace and inspections, fire risk assessment, monitoring, audit and review (between 20 and 90 minutes);
- a check by the employer that the company has the ability to carry out the specific work it has applied for examination of method statements, risk assessments, references, examples of previous similar work, training and resources; or site visits etc; and
- monitoring by the member of the contractor while it is doing the work is it managing the work

safely, carrying out the method statements, liaising properly, managing the site effectively and providing supervision etc?

In addition to members (able to add applicants to, and amend details, after having assessed the applicant), CHAS also has subscribers (do not assess applicants but are able to access, but not amend, the database).

Other points to note:

- Constructionline (see below) provides the pre-qualification tool for use in financial standing, technical references and other areas. With Department of Trade and Industry agreement, CHAS and Constructionline formed a "mutual working agreement". The CHAS management group supports the principles of a single register and so works jointly with Constructionline.
- CHAS sets standards for companies that employ fewer than five people;
- · reassessment is biennial;
- CHAS is due to become free for client user members to use from 1 April 2007;
- applicants to CHAS pay fees between £55 and £115, depending on size and whether the application is to CHAS or a member (reassessments are £40-£60); and
- there is an additional annual accreditation fee. There are two levels of accreditation (initial and annual fees range from £40 to £150), both of which "may" be able to reduce insurance premiums through Trade Direct (10%15%).

SAFEcontractor

SAFE*contractor* is an OSH accreditation scheme for contractors that assesses their OSH polices and procedures¹⁰³. Currently, it has 6,000 contractors and hopes to reach 20,000 by 2009. It lists seven industry sectors where it is used: property; facilities management; retail; leisure; food manufacturing; and construction. The web site allows the client to search the database for new

^{103 &}quot;SAFEcontractor", National Britannia factfile, www.safecontractor.com/main.html

contractors to join their approved contractor list. SAFE*contractor* claims other benefits of its certificate include reduced liability insurance, advice on employment law, marketing benefits, improved OSH standards and savings on administrative costs. The scheme is operated by National Britannia (which also runs the HSE's Infoline service and Incident Contact Centre, as well as providing consultancy services). SAFE*contractor* offers information, training and "special help" for companies with fewer than five employees.

Clients pay for tailored advice but can search the database of contractors, including by work activity and location. Contractors pay £100–£500 to register, depending on size. They then complete a questionnaire; information on "contractor capability" is posted directly into the database; the OSH documentation is assessed by a qualified and experienced auditor. Upon accreditation, the contractor receives a certificate and an accompanying schedule that identifies the scope of accreditation, including the work activities that have been included in the assessment. Contractors who do not achieve accreditation receive a report detailing what is required, recommendations to achieve accreditation and access to guidance notes and a telephone helpline.

The audits are undertaken by OSH professionals with a degree or equivalent (including environmental health officers, those with an MSc in OSH and IOSH-registered safety practitioners). An internal professional guidance note sets the professional standards and procedures to be followed by the auditors.

ACHILLES SCHEMES

The Achilles Group provides supplier management information, offering procurement and business solutions to companies. The company claims that its "supplier management schemes improve the efficiency of the procurement cycle while promoting health and safety, environmental management and wider corporate responsibility in the supply chain". In the UK¹⁰⁴, it appears to

¹⁰⁴ www.achilles.com/Group/findrelevantservices.htm?FindRegion=UK

offer around 30 services (including through divisional companies), many of which are relevant:

First Point Assessment (FPAL): supply chain database in the UK and Dutch oil and gas industry. It claims "FPAL is the key tool used by purchasers to source and select suppliers. The process replaces approved vendor lists and eliminates costly duplication in pre-qualifying suppliers." For suppliers, "it provides an easy and effective tool for marketing a company's products and services through online registration to the database. Suppliers can also complete a capability profile and participate in two-way performance feedback with their clients, which can be benchmarked against competitors." There are 2,400 suppliers and 70 purchasers registered on FPAL.

Link-up suppliers and buyers services: UK rail industry supplier registration and qualification database scheme. It offers a single common qualification process for suppliers that is shared by Network Rail and over 80 rail organisations including infrastructure management contractors, underground infrastructure companies, construction companies and all major train and freight operators. It offers reduced duplication and administration. Achilles claims more than 3,500 suppliers and contractors are registered on the Link-up. Of these, 1,000 are also participating in the Proof scheme, which provides a common auditing process for suppliers of safety-critical produces and services. The company claims that although used primarily for a particular rail contract or tender, "it is also used by many members for their non-rail industry requirements too".

SourceSelect: supplier management system used by the UK pharmaceutical industry to source and prequalify current and potential suppliers. It is run by Achilles on behalf of Eli Lilly. The initial cost is £500; there seems to be no OSH information required on the application form.

UVDB buyer and supplier services: database for the UK utility industry to source and prequalify current and potential suppliers of major products, services and works.

In addition SourceSelect and UVDB run "Verify" services for suppliers and buyers. The verify is a "standardised safety, health, environment and quality assessment [SHEQ]." The UVDB verify "is applicable for contracts where a high operational risk is present". Verify was established to share the process of supplier verification and assessment through a common industry approach and

has now been adopted by 22 utility companies and over 35 major contractors. There are now over 1,250 key service providers and contractors registered on the scheme.. This is a two-stage process, which involves an Achilles assessor auditing a questionnaire on a supplier's in-house SHEQ systems, with the score benchmarked against the average of contractors registered for the scheme. Secondly, the assessor makes an on-site assessment of the application of the systems. Verfiy is also available for SourceSelect, while "Proof" is the transport equivalent.

Constructionline

Constructionline 105 is a DTI endorsed register of pre-qualified local and national construction and construction-related suppliers. The concept of a single national database was proposed by the 1994 Latham Report. Since then, Constructionline has grown and been updated in line with the needs of modern procurement. The OGC "common minimum standards" and the Local Government Task Force also recommend using Constructionline as part of the pre-qualification and tendering process. Constructionline advises: "We gather and assess pre-qualification information on behalf of public and private sector procurers and provide them with access to over 12,500 fully accredited suppliers free of charge. In addition, we also help contractors and consultants by reducing the need for them to fill-in pre-qualification forms for every tender and provide them with access to over 1,500 buyers. The buyers range from large central government departments and agencies to local authorities, housing associations, universities and NHS trusts. Registration starts at £70 a year. One of the stated benefits for buyers is "Supporting local firms and SME's." Health and safety is one of nine criteria, shortcomings in which would move the supplier from "active" to "consult" status, which would allow buyers to contact Constructionline for details of the deficiency.

There is a health and safety form developed with CHAS. If the supplier has a CHAS-accredited certificate, it need not complete Constructionline's OSH form. Applicants must, however, complete the form if they hold only a CHAS compliance letter. The application covers competent advisers and their qualifications, how accidents are investigated, accident and enforcement action

¹⁰⁵ www.constructionline.co.uk/static/html/static_page/Home.htm

details, provisions for ensuring sub-contractors' OSH competence, training, risk assessment, safety and procedures and policy.

Also of potential interest here is PSL (Partnership Sourcing Ltd)¹⁰⁶. Established by the CBI and the Department of Trade and Industry (DTI) in 1990 to promote the concept of partnering in business, it is looking at supply chain issues, including health and safety. PSL has also developed CRAFT (Collaborative Relationship, Assessment, Fulfillment and Transformation), which it describes as a "framework to support successful relationship building and the application of partnering approaches". Health and safety is mentioned only in the skillset for independent partnering advisers. CRAFT would appear to be too abstract for most SMEs.

In November 2006, PSL and the British Standards Institution (BSI) published what they called the "world's first relationship management" Publicly Available Specification (PAS) for creating and maintaining successful business-to-business collaborations 107. The PAS sets out an eight-stage approach (as does CRAFT) to help organisations develop and manage their own approaches to working with other organisations more effectively. The BSI claims it applies to organisations of any size.

 $^{^{106}}$ www.pslcbi.com/ 107 "Collaborative business relationships", PAS 11000, BSI, www.bsi-global.com

5.11. CERTIFICATION AND STANDARDS BODIES

BSI updated its guidance publication, BS 8800 in 2004 ¹⁰⁸, to reflect changes in legislation and risk management and international developments (the publication of OHSAS 18001, OHSAS 18002 and the International Labour Organization's ILO-OSH 2001). BSI claims that BS 8800:2004 "now contains twice as much information as the previous edition". Such a claim, in itself, is not necessary a recommendation for SMEs, although the BSI insists its guidance is relevant to all sizes of organisation. It advises that the guidelines "are based on general principles of good management and are designed to enable the integration of OSH management within an overall management system". The coverage includes OSH policy, organising, risk assessment, planning and implementing, measuring performance, investigation and response, audit, reviewing performance, comparison with other management system, and hazardous event investigation.

There have been years of failed attempts at international level to agree a certifiable OSH management standard. This led to several certification bodies and contractors developing OHSAS 18001:1999, which was based on BS 8800 and offers a "specification" for auditing and certification. The elements of 18001 cover policy, planning, management programme, implementation and operation, checking and corrective action and management review (18002 offers advice on

¹⁰⁸ "BS 8800:2004 OSH management systems. Guide", www.bsi-global.com/Health/bs8800.xalter

each element of 18001)¹⁰⁹.

Much of the guidance and specification above correlate with HSG65, which should facilitate any consideration that the Inquiry might pursue in relation to core criteria (see below). The HSE is also embarking on a review of HSG65.

Det Norske Veritas (DNV)¹¹⁰ is an independent foundation "with the objective of safequarding life, property, and the environment"; its "core competence [is] to identify, assess, and advise on how to manage risk". It offers a "Risk-Based Certification" service 111, with DNV auditors assessing an organisation's OSH management system, measuring compliance against elected standards, and certifying to 18001. It advises, however, that this is particularly appropriate for larger organisations. It also offers a list of approved products and companies 112. Firms listed in a maritime register 113 are granted approval as Service Suppliers according to procedures and acceptance criteria established by Det Norske Veritas AS. The listed firms are approved to deliver services that fulfill the requirements stipulated in the rules for classification.

Other providers worth looking at include SGS Yarsley International Certification Services Ltd, which provides environmental and quality services in several

exchange.dnv.com/ExchangeMenu/TaskManager.asp?WCI=MenuArea&WCE=PMA 17 1546&uid=ID2007 0129461421921882 113 www.dnv.com/maritime/registers/servicesuppliers/index.asp

^{109 &}quot;OHSAS 18001:1999 OSH management systems – specification" and "OHSAS 18002:2000 – OSH management systems - guidelines for the implementation of OHSAS 18001", www.bsiglobal.com/Health/bs8800.xalter

⁽available as a package with BS 8800).

www.dnv.com/www.dnv.com/certification/managementsystems/healthandsafety/hnsoverview.asp

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sectors, including automative, agriculture and oil, gas and chemicals 114.

¹¹⁴ www.uk.sgs.com/.

6. PRE-QUALIFICATION

The fact that RoSPA's NOSHC has decided to pursue its SMEs Inquiry is an indication that the quasi-voluntary engagement of SMEs – often free of charge – is not working adequately. One "lever" here is OSH pre-qualification, which is already in evidence in construction. Roger Bibbings, RoSPA's occupational safety adviser, has started to explore the feasibility of one possible recommendation that the Inquiry might make, ie whether or not RoSPA should consider a UK-wide SME OSH assurance system that might, eventually, be endorsed by the HSE.

In December 2006, RoSPA held a meeting involving representatives from the LSC, Workplace Health Connect, the ABI (Making the Market Work) and the HSE¹¹⁵. (A diary confusion meant that CHAS was not represented.) Other tools that might be relevant include RoSPA's own HSR and OHSAS 18001 (possibly)¹¹⁶ Points that emerged at the meeting were¹¹⁷:

- All attendees gauge assurance of OSH in SMEs in some way, using different
 OSH management standards and assessments of (and/or attestation to)
 organisational OSH competence. The plethora of evidence options and
 standards needs to be reduced (or at least a degree of equivalence developed).
- Scrutiny of the compliance process can result in poor experiences for SMEs because of a lack of OSH competence in the scrutineers, different OSH standards and approaches, duplication of effort (due to lack of mutual

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¹¹⁵ David Bryant, (Workplace Health Connect NE pilot), Kate Hopton (Association of British Insurers), Frank Kelly (Learning and Skills Council) and Debra Macleod and Jim Neilsen (HSE audio link)

www.osha-bs8800-ohsas-18001-health-and-safety.com
Meeting details: file "smemapping20.doc", Roger Bibbings

recognition), and "paper-only", rather than face-to-face, engagement. Without intevention, this situation will continue.

- The HSE will continue to focus its limited resources on changing SMEs through HSE and LA interventions. Although it will work with partners, it will be reluctant to recommend any single standard or form of assessment of organisational OSH competence.
- Business organisations might perceive a new standard as a third-party imposition of OSH "red tape".
- The HSE, trade associations, the ABI, CHAS, LSC might be persuaded to work towards a core or "meta" standard (and also minimum competence requirements for assessors).

6.1. RoSPA umbrella?

A new assurance system could be realised either through:

- a RoSPA standard marketed by RoSPA. This would give RoSPA the freedom necessary to design and maintain a bespoke standard, but would take a long time possibly too long to gain recognition and a share of the market. It would be unlikely, however, to have the wide impact necessary, although it might produce a profit at some stage;
- the amalgamation and development of existing assurance schemes possibly under a RoSPA umbrella. This has disadvantages of compromise and trade-off, but advantages of avoiding duplication and achieving the impact desired.

Under the second option, RoSPA would need to persuade these bodies why they should come under an umbrella, and why RoSPA might be the most appropriate organisation. Potential incentives include:

- additional funding from previously inaccessible sources;
- access to new groups of clients; and
- increased demand for services as a result of a raised profile.

There is also the question: "why RoSPA?". It is not enough to argue there may be an absence of alternatives. RoSPA, however, already has relationships – and potential leverage – with many of the players involved, as well as with many large employers and with the regulators. It would also bring a track record in campaigning and issue-raising, assurance and accreditation. The Inquiry should, however, determine whether RoSPA's standing among SMEs is sufficiently strong or whether there is a need to partner with an organisation that represents, or works with, SMEs.

The content and experience are both, to a large extent, already available.

Questions that the Inquiry might wish to pursue at its second stage:

- What is the best way of synthesising best available practice into a universal SME approach?
- Is a universal approach practicable, or should there be different approaches for small, smaller and smallest?
- How would the approach include an element of face-to-face review?
- Should RoSPA's role involve delivery or should it concentrate on promotion,

assurance and accreditation.

6.2. Core criteria

In late 2006, the Electrical Contractors' Association (ECA) and the Heating and Ventilating Contractors' Association (HVCA) published "core criteria" to enhance the safety aspects of the tendering process for construction projects 118. The criteria should help avoid organisations having to submit their credentials repeatedly when tendering. The dozen core criteria are based on the Management of Health and Safety at Work Regulations 1999 and cover issues such as access to competent advice, individual qualifications, health and safety policy and a risk assessment. The criteria can be used in "pre-qualification" assessments, to help clients and major contractors look for evidence of contractors' OSH credentials. The criteria follow an HSE research report¹¹⁹. The criteria are already aligned to CHAS and should align further with other schemes after they are included in the guidance on the forthcoming Construction (Design and Management) Regulations 2007. NOSHC should consider whether the criteria can be applied beyond the construction and related sectors to SMEs in general and perhaps used as a starting point for efforts to achieve mutual recognition.

^{118 &}quot;Core criteria for assessing contractor safety", www.hse.gov.uk/electricity/live.htm.119 "Developing guidelines for the selection of designers and contractors under the Construction (Design and Management) Regulations 1994", RR no.422, www.hse.gov.uk/research/rrhtm/rr422.htm.

7. FUTURE DEVELOPMENTS AND TIMETABLE

The NOSHC will hold a first formal "hearing" alongside the H&S Expo at the NEC in Birmingham on 23 May 2007¹²⁰. The hearing will allow members of the NOSHC to engage directly in an open question and answer format with key respondents. For this stage, NOSHC is calling for evidence on various types of assessment being used by clients and main contractors, pre-qualification schemes, insurers and brokers, training organisations, schools and other bodies to assess SME's health and safety competence. NOSHC wants to identify what is being carried out, what works and whether there is scope for improvement. The specific issues on which NOSHC is seeking information and views include:

- objectives of these assessments and their context;
- the methodologies employed;
- the numbers of assessments being undertaken;
- the competence of assessors;
- analysis and use of the results;
- the value added for the assessing organisation;
- the value to the SME; and
- the scope and options for improvement in assessment.

¹²⁰ NEC Hilton Metropole, from 2.30 pm to 4.30 pm. Further details: Roger Bibbings, rbibbings@rospa.com or tel: 0121 248 2095.

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APPENDIX 1: NOSHC INQUIRY STEERING GROUP - CURRENT MEMBERS

Paul Reeve, (chairing), Electrical Contractors' Association,

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Sheila Pantry, Consultant

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Marilyn MacFarlane, Learning and Skills Council

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E: Marilyn.MacFarlane@lsc.gov.uk

Rosina Robson, Federation of Small Business

T: 020 7592 8100

E: Rosina.Robson@fsb.org.uk

Roger Bibbings, RoSPA (Secretary)

T: 0121 249 2095

E: rbibbings@rospa.com

APPENDIX 2: POTENTIAL INTERVIEWEES, CALLS FOR EVIDENCE

Achilles Group:

Amicus: Rob Miguel or Bud Hudspith:

Association of British Insurers: Tim Humphreys

Bee Safe Ltd:

BPS Solutions Ltd:

British Aerosol Manufacturers' Association;

British Association of Chemical Specialities: Philip Clarke

British Chambers of Commerce: Anne Tipple

British Chemical Distributors and Traders Association: Douglas Leech

British Coatings Federation: Moira McMillan

British Constructional Steelwork Association Ltd: Pete Walker

British Dental Association: Daniel McAlonan

British Furniture Manufacturers;

British Glass Manufacturers' Confederation: Declan Moore

British Hospitality Association: Bob Cotton

British International Freight Association: Robert Keen:

British Printing Industry Federation;

British Red Cross:

British Retail Consortium: Annabel Berdy

British Safety Council:

British Safety Industry Federation:

British Wood Preserving & Damp Proofing Association: Leslie Hill

British Woodworking Federation: Michael Lee

Business Link:

Cardiff University: David Walters

CHAS: John Murphy,

Chemical Industries' Association;

Citation plc:

Confederation of British Industry: Janet Asherson Confederation of Paper Industries: Andrew Braund Construction Confederation: Shelley Atkinson–Frost,

Construction Employers' Federation;

Construction Industry Training Board: Keith Fear Construction Plant Hire Association: Haydn Steele

Constructionline:

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Cooper Safety Associates Ltd:
Croner Consulting:
Det Norske Veritas:
Education colleges:
Electrical Contractors' Association: Paul Reeve
Employers in Voluntary Housing.
Engineering Employers' Federation: Louise Ward, Steve Walter
Federation of Master Builders: Phil Russell,
Federation of Piling Specialists;
Federation of Small Businesses: Rosina Robson, Mary Boughton
Federation of Tour Operators: Angela Hills
Fire brigades and authorities:
Forum of Private Business: Tim Kind
Gainas Safety Consultants:
GMB
Hair and Beauty Industry Association: Wendy Nixon
HASTAM:
Heating and Ventilating Contractors' Association: Bob Towse
HSC Small Business Trade Association Forum: Judith Donovan
HSE: Andrew East (Construction Sector)
HSE: Debra MacLeod – SBTAF Secretariat
HSE: Elizabeth Hodkinson (Head Cross Cutting Interventions Division)
HSE: Elizabeth Homsby - SBTAF Secretariat
HSE: Heather Butler – SBTAF Secretariat
HSE: Jane Lumb (Radiation Policy Delivery team)
HSE: Laurence Golob (Business Involvement Unit)
HSE: Malcolm Darvill (International Policy)
HSE: Richard Boland (Construction Policy)
HSE: Theresa Quinn (Better Regulation Unit)
Independent Safety Consultants Association (ISCA):
Institute of Directors: Geraint Day
Insurance companies:
Investors in People:
IOSH:
JNC Safety Services:
LANTRA: Learning and Skills Council: Marilyn MacFarlane

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Local Authorities: Steve Sumner
London Fire Brigade
Major Contractors Group:
MSK Associates:
National Association of Shopfitters: Robert Hudson
National Audit Office:
National Care Homes Association: John Gililland
National Farmers' Union: Pat Stanley
National Federation of Demolition Contractors: Howard Button
National Federation of Retail Newsagents: Catherine Tong
National Federation of Roofing Contractors;
National Hairdressers' Federation: Ray Seymour,
National House Building Council;
NHS Plus: Kit Harling
Norwich Union:
Partnership Sourcing Ltd: lan Tough, Les Pyle
pcm Safety Management Ltd:
Professional Contractors Group: John Kell
Quadriga Health and Safety: lan Clements
Qualifications and Curriculum Authority: Rachel Davey
Quantum Risk Management:
Quarry Products Association: Martin Isles
R G Wilbrey (Consultants) Ltd:
Radio, Electrical and Television Repairers' Association: Mike Floodgate
Registered Nursing Home Association: Frank Ursell
Retread Manufacturers Association;
Road Haulage Association: Ruth Pott
Roads to Safety: Joe Laverick
RoSPA: Roger Bibbings
Royal Institute of Chartered Surveyors: Colette Best,
RSK-ENSR:
Rural & Industrial Design and Building Association: Tony Hutchinson
SAFEContractor:
SAFed
Safety Groups UK:
Schools:
Sector Skills Councils:

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SELECT (Scottish Electrical Contractors);

SFEDI: Nigel Hudson:

SGS Yarsley International Certification:

Shires Safety Consultants:

Site Safety Services:

Small Business Bureau: Garry Parker Small Business Service: Charlotte Clarke

Small firms: need individual firms
Small Firms Development Initiative:

St John Ambulance:

TAA Health & Safety Consultancy:

TGWU

The Health & Safety People:

Timber Trade Federation: Jean Rennie

TUC: Hugh Robertson

UNISON

Vehicle Builders and Repairers' Association: John Morecroft

Waterman Health & Safety:

White Young Green:

Workplace Health Connect: David Bryant

APPENDIX 3: SMALL BUSINESS TRADE ASSOCIATION FORUM MEMBERS

The following are members of the HSC's Small Business Trade Association Forum. All have also been included in the potential attendees list.

Douglas Leech, British Chemical Distributors and Traders Association

Moira McMillan, British Coatings Federation

Pete Walker, British Constructional Steelwork Association Ltd

Annabel Berdy, British Retail Consortium

Janet Asherson, Confederation of British Industry

Andrew Braund, Confederation of Paper Industries

Louise Ward, Engineering Employers' Federation

Phil Russell, Federation of Master Builders

Rosina Robson, Federation of Small Business

Tim Kind, Forum of Private Business

Geraint Day, Institute of Directors

Ray Seymour, National Hairdressers' Federation

Colette Best, Royal Institute of Chartered Surveyors

Tony Hutchinson, Rural & Industrial Design and Building Association

John Morecroft, Vehicle Builders and Repairers' Association

Philip Clarke, British Association of Chemical Specialities

Anne Tipple, British Chambers of Commerce

Daniel McAlonan, British Dental Association

Declan Moore, British Glass Manufacturers' Confederation

Bob Cotton, British Hospitality Association

Robert Keen, British International Freight Association

Leslie Hill, British Wood Preserving & Damp Proofing Association (also Property Care Association, the Wood Protection Association and the British Pest Control Association)

Michael Lee, British Woodworking Federation

Shelley Atkinson – Frost, Construction Confederation

Haydn Steele, Construction Plant Hire Association

Paul Reeve, Electrical Contractors' Association

Angela Hills, Federation of Tour Operators

Wendy Nixon, Hair and Beauty Industry Association

Bob Towse, Heating and Ventilating Contractors' Association

Robert Hudson, National Association of Shopfitters

John Gililland, National Care Homes Association

Pat Stanley, National Farmers' Union

Howard Button, National Federation of Demolition Contractors

Catherine Tong, National Federation of Retail Newsagents

RoSPA NOSCH SME map, Howard Fidderman- 74 -

John Kell, Professional Contractors Group

Martin Isles, Quarry Products Association

Mike Floodgate, Radio, Electrical and Television Repairers' Association

Frank Ursell, Registered Nursing Home Association

Ruth Pott, Road Haulage Association

Garry Parker, Small Business Bureau

Jean Rennie, Timber Trade Federation

The following HSE officials attend the forum too:

Elizabeth Hodkinson (Head Cross Cutting Interventions Division)

Jane Lumb (Radiation Policy Delivery team)

Laurence Golob (Business Involvement Unit)

Theresa Quinn (Better Regulation Unit)

Richard Boland (Construction Policy)

Andrew East (Construction Sector)

Malcolm Darvill (International Policy)

Heather Butler - SBTAF Secretariat

Debra MacLeod - SBTAF Secretariat Elizabeth Hornsby - SBTAF Secretariat