RoSPA firmly welcomes the HSC's proposals to require employers to make arrangements for consulting employees on occupational health and safety matters. Consultation with, and the involvement of, the workforce is an essential pre-requisite for the effective management of workplace risk. Not only should employees have a right to be involved in decision making at the workplace about safety and health but experience shows that employers cannot manage these matters and meet their legal obligations without doing so.

In short, effective workforce involvement is a vital ingredient in building a robust health and safety culture at the workplace which not only ensures the protection of employees and others but promotes business efficiency.

RoSPA fully agrees with the need not to disturb the existing arrangements for safety representatives and safety committees whereby safety representatives are nominated by independent recognised trade unions. Experience suggests that these regulations have worked well and it would be folly to disrupt the current arrangements. On the other hand, the resulting architecture will be cumbersome and the detailed differences between the various regulations will inevitably lead to confusion.

RoSPA would strongly favour a single 'core set' of duties (and guidance) on health and safety consultation applying to all workplaces with 'top up provisions' for specific sectors and for cases where safety representatives were appointed by recognised independent trade unions.

The proposed regulations leave it open to employers to decide on the most appropriate means of consulting. Clearly it is important that businesses should arrive at arrangements which best meet their particular needs and circumstances. Equally it is important that employees should have an effective say in deciding what those arrangements should be.

RoSPA therefore would favour amendment of the draft guidance to make it clear that employers should take initial soundings to determine employees' views about which option they would prefer.

Paragraph 29 of the consultation document suggests that the additional functions of investigating potential hazards and complaints and inspecting the workplace (as provided for under the 1977 Regulations) would be a 'requirement' for representatives elected under the proposed regulations. However, although the 1977 Regulations
allow safety representatives to carry out specified functions, they do not impose duties. The addition of these functions therefore on representatives elected under the new regulations would not be a burden. Indeed, in RoSPA's view, it would be essential to give a full set of functions equivalent to those currently available only to union appointed representatives.

The same point about the need for equivalence can be made about to the duty of employers to provide adequate facilities and assistance. In the case of the new regulations this will be important in relation to the ability of candidates to campaign in elections.

RoSPA strongly supports the proposals regarding training. The guidance should stress the need to make a training needs assessment and that the representatives themselves should be consulted about their training needs and relevant training provision.

The proposed regulations make no provision for the establishment of safety committees and this matter is only touched on tangentially in the guidance. In RoSPA's view, this is a major gap. If safety representatives have been elected, then why should the right to request the establishment of a safety committee only be enjoyed by trade union representatives?

Quite apart from this question, there is a need to commend to employers the value of workplace safety committees and to offer practical guidance on how they can best be used to enhance the effective management of health and safety at work. One area in particular which needs to be highlighted in this respect is the use of safety committees to review and update risk assessments and to take an active role in monitoring, review and audit.

RoSPA feels strongly that nothing in the new regulations should be allowed to create difficulties or impose disproportionate requirements on small firms. Equally, effective workforce involvement is entirely appropriate to help smaller businesses identify and meet their health and safety needs.

While paragraph 26 of the consultative document emphasises the distinction between 'safety representatives' and 'competent persons' appointed by the employer under the *Management of Health and Safety at Work Regulations*, nothing should prevent these roles being combined - for example, where the employer in a smaller business may choose to provide additional training for an elected representative so that s/he can also provide competent advice under the *Management Regulations*. Clear guidance would be necessary to help avoid any confusion that might arise from combining the two roles in this way.

If this dual role does emerge as a response to the new regulations, RoSPA would suggest a new term might be devised to describe it and the guidance would need to emphasise that such a person would have protection against unfair action by the employer as a result of exercising their health and safety functions.
May 2000

Employee involvement

The real challenge posed by the HSC's discussion initiative on enhancing employee involvement (DDE 12) is how to secure the engagement of each person at work in the process of managing risk. The HSW Act and European 'social partnership' approach to OS&H accepts that employees have a right to be involved in decisions about their health and safety and that workers need to be involved in OS&H management because of their detailed and expert knowledge of the working environment generally. In short, effective health and safety management is as much a 'bottom up' as a 'top down' process and thus employee involvement and participation is a fundamental requirement for the development of a positive 'health and safety culture'.

Such a culture is often described as a shared view at all levels within organisations of the significance of risks and the efficacy of organisation and arrangements needed to control them. But it also needs to be remembered that it is only a sub-set of an organisation's overall culture. It is not HSC's role to dictate to employers which management style they should adopt but there is a clear implication that organisations cannot manage health and safety unless they adopt a style which is open, collegiate, participatory, and informed by values which acknowledge and respect the contribution of every employee at every level.

That said, what the HSC exercise may not have fully appreciated is the confusion which still exists about what actually constitutes effective consultation on health and safety. Despite the expansion of the concept by Article 11 of the European Framework Directive, the approach in many organisations is still fairly minimalist, i.e. they simply provide information about decisions already taken. Good practice ought to be to 'inform, seek, consider and respond to' employee views and in a timely fashion. For consultation to be meaningful and effective, timescales and ground rules need to be set; consultees need to be properly briefed to be able to contribute; and the results of consultation need to be fed back to them so that they can remain engaged with the process.

Then there is the question of how consultation is best achieved, including which kinds of issues should be consulted on and at what level. Clearly individual employees should have a right to be informed and consulted about things that affect them personally and much useful consultation and feedback from individuals takes place during training and team briefings and 'tool box talks'.

On the other hand, more complex matters such as policies affecting groups of workers or employees in a whole department or organisation are probably best dealt with through some form of representative consultation.

Arguably one of the weaknesses of the 1977 Safety Representatives and Safety Committees Regulations was that they concentrated more on safety representatives than on committees, with a requirement for one to be set up only if two or more safety representatives requested this in writing. RoSPA feels that this approach was an error. In future there needs to be much more emphasis on employers having effective committee arrangements in place, with seats provided for employee representatives, managers, health and safety advisers and others.
Such committees should become a much stronger focus for overseeing and developing the health and safety management system in an organisation as well as a means for focusing on specific problems. Too often in the past health and safety committees have been seen as an appendage of the management system, without sufficient scope and resources and chaired by persons without sufficient authority. They have not worked in a planned way and have tended to become a reactive forum for the discussion of operational problems which should be dealt with by line managers and staff on a day to day basis.

In too few cases have joint committees been given a central role in devising corporate health and safety policy and objectives, or in monitoring and reporting on progress towards targets. RoSPA believes that greater emphasis be placed on the role of such committees as a main focus for employee consultation and involvement.

On the other hand, getting real employee OS&H 'buy-in' also requires skilled people who can represent the employee's point of view and provide an important communication linkage. In general this has been the role of the workplace safety representative. And research evidence suggests a strong association between lower accident rates and the presence of such representatives, especially where they are part of the overall health and safety management team.

The attitudes, skills and knowledge necessary to function as a successful safety representative are extensive and include not only technical knowledge but the ability to listen to and articulate the concerns of fellow employees, to gather facts and marshal arguments and to understand and appreciate other information and points of view. These skills in fact are crucial to the success of dialogue over health and safety matters where issues can be both complex and sensitive.

RoSPA welcomes the idea of introducing some sort of indicative qualifications for safety representatives although, of course, if people at work choose to elect someone to represent them, that person should not be de-barred from playing such a role due to lack of formal qualifications.

In fact RoSPA strongly favours the idea of creating a common framework of rights and functions for all safety representatives by amalgamating the 1977 and 1996 regulations and the 1989 offshore regulations and similar regulations relating to mines and quarries but allowing for the appointment of safety representatives by recognised trades unions where there is an established industrial relations framework.

The functions of safety representatives, particularly as set out in the 1977 regulations, give them rights to carry out those functions independently. In practice however very many safety representatives undertake functions such as inspection and investigation of accidents and incidents jointly with managers, and other, staff. RoSPA would particularly like to see a clearer right for safety representatives to be involved in undertaking and reviewing risk assessments, taking part in active monitoring procedures, participating in investigations and being trained to administer health and safety management audit schemes.
Looking after our safety reps

The importance of permitting workers, via their trades union representatives, to participate in health and safety matters at the workplace was clearly recognised in the Report of the Robens Committee from which the 1974 *Health and Safety at Work Act* sprang - although it was not until 1977 that specific Regulations were brought in. These allowed trades unions recognised for industrial relations purposes to appoint safety reps with certain representative and inspection functions. The legislation was backed by other rights such as that to time off for trade union organised training and the right to require the setting up of joint health and safety committees.

The enthusiasm of Robens for this approach was based in large measure on the involvement of trades unions in safety matters in the then nationalised industries such as coal, electricity, and mining as well as in other areas such as chemicals and foundries.

Yet, even before the ink of the Report was dry, the structure of British industry was changing, with a shift towards smaller businesses, sub-contracting and, of course, the collapse of traditional industrial sectors. Throughout the 1980s trades unions and the TUC in particular did an enormous amount to secure implementation of the 1977 Regulations, including developing a highly effective training programme for safety reps supported by public funds.

At the beginning of the 1990s, in the light of the general requirements of the European Health and Safety Framework Directive for worker consultation, the UK's 'unions only' approach was challenged and eventually the HSC agreed to the introduction of the 1996 'Employee Consultation' regulations. These require non-union employees to be consulted (although it was for the employer to decide how).

In November 1999, in the run up to the HSC's consultation exercise on 'Revitalising Health and Safety' (RHS), the Commission issued a discussion document seeking options for promoting greater worker participation. RoSPA, along with many others, responded to this and called for rationalisation and strengthening of the existing legal framework. The Society suggested a range of practical ideas for securing more effective worker involvement, particularly in small firms.

Unions and employers working in 'partnership' to a common purpose (which is very much the current TUC theme in health and safety as in other matters) was picked up at Point VII in the ten point RHS strategy statement launched just three years ago.

Since then HSE has been busy with a whole raft of initiatives to try and lay the ground for the way forward. These include research to establish the impact of safety representatives on H&S performance and pilot projects to test the idea of workers' roving 'safety advisers'.

It seems clear from research evidence that organisations with active safety representatives have lower accident rates - but whether this is a direct effect or simply a feature of the fact that businesses with better H&S management tend to have active trades unions too (or a mixture of both) is clearly a matter for continuing debate.
Where there does seem to be agreement however is that, in practice, health and safety cannot be managed successfully by the imposition from the top down of rules and prescriptions. Top level leadership is key but the rest has to be essentially 'bottom up'. As TUC Commissioner, Owen Tudor is wont to stress, 'health and safety is something which managers can only do with people, not to them'. Above all managers need to be able to tap into workers' knowledge and involve them and their representatives in problem solving in order to get their 'buy-in'.

Indeed HSE, along with many others, recognise the power of safety representatives in promoting and supporting cultural change. Thus, besides their ability to represent their constituents' H&S concerns upwards to managers, a key area for safety reps' skills development is that of improving those key interpersonal skills which enable them to be able to interact positively with their co-workers.

There is broad consensus that trained, active and involved safety representatives are good for safety and for health. Indeed, the HSC see workforce involvement not just as very important but essential to securing the step change which RHS envisages.

The main problem which the H&S system faces, however, is that, largely as a result of changing employment structures and practices, the number of safety representatives in workplaces in the UK has actually declined. HSE estimate that 14 million out of a workforce of 22 million do not currently have access to a safety representative. Only some 8 million workers now belong to trades unions and these are heavily concentrated in the public sector and in larger firms. Currently over 90 per cent of Britain's 3.6 million businesses employ less than ten employees where formal in-house representative structures are likely to be less appropriate in any case.

HSC are understood to be entertaining the idea of merging the 1977 and 1996 Regulations together possibly with the 1989 Offshore Safety Representatives and Safety Committees Regulations. Key issues here are whether the rights and functions of union and non-union representatives should be aligned (non union reps do not have rights to investigate, for example); whether the workforce should be divided up into constituencies (as in the Offshore Regulations) to allow all reps to be elected (this could create surrogate union recognition ballots where unrecognised unions put up candidates as safety reps); whether all safety reps should have rights to paid time of work for training of their choice; and how non-union safety representatives might have access to independent third party support (as do their trades union counterparts). One option might be to allow safety reps to call on assistance from their local health and safety group or from bodies such as IOSH and/or RoSPA and the British Safety Council.

It seems likely that HSC will seek to go down the route of setting size thresholds for representation with workplaces of less than 20 employees under no requirement to have reps or committees but still under a general obligation to consult informally. Businesses of 50 or more employees might be required to have at least two reps plus a committee with businesses in between having access to a safety rep only.

These requirements in turn might be backed by an extension of the right of unions to appoint roving safety representatives to cover their members in businesses in which
they were recognised (as has been the case with the Musicians Union and Equity under the 1977 Regulations) although this is obviously a contentious issue for many employers.

It would be a pity if the debate about greater workforce involvement got bogged down in detailed discussion about rights, functions and processes prescribed in regulations. As RoSPA pointed out in its comments in 1999, because health and safety management goes right to heart of the way in which businesses manage their affairs generally, so too does effective workforce involvement in health and safety.

The HSC cannot legislate to outlaw command-and-control management styles. What it may be able to do is legislate to require employers to consult safety reps about matters which affect the workforce as a whole. In practice this will not happen unless line managers understand the need to consult and listen to every individual employee about the H&S matters that affect them personally.

In this sense, good practice on H&S representation is inseparable from good practice when it comes to matters such as: H&S communications (including safety briefings and 'toolbox talks'); dynamic risk assessment by individual employees and work groups; open, 'no blame' 'near-miss' reporting; suggestions schemes; and so on.

Although a well thought out legal framework for safety representation can provide a baseline, this needs to be connected very closely via ACoP material and other guidance to wider requirements for managing health and safety; for example, involving employee reps in accident and incident investigation and in performance reviews and target setting. In turn HSC need to make many more benchmarking good practice case studies available to help managers, safety reps and professionals understand how to approach involvement and partnership.

There is also a case for establishing awards for outstanding work by safety reps (the TUC has, in fact, established such an award this year) and looking at how consultation/involvement is covered (or not!) in management training and in proprietary auditing packages.

More importantly, when they come to review the RHS targets next year, the HSC need to include some targets for extension of safety representation and committees alongside other 'input', 'upstream' targets such as the percentage of managers who have trained and so on.

And beyond this, and most important of all, the fundamental challenge is to find ways of changing the status of safety reps so that they are seen not just not just low level hazard spotters but as civic representatives of people at work with meaningful status.

People need to be encouraged to come forward to be safety reps. They need assurance that they will get paid time off and support to do the job; that they will not be put at any kind of disadvantage and that they will get the back-up they need, if not from a trades union then from other sources such as professional institutions and safety organisations.

We need to look after our safety reps. They deserve our support and encouragement.
Strengthening workplace involvement

Twin themes in the Health and Safety Commission’s (HSC) strategy for improving UK health and safety performance are enhancing director leadership of health and safety and strengthening workforce involvement.

Some significant strides have been made by HSC in getting health and safety onto boardroom agendas. These include official guidance on directors’ responsibilities (including encouragement for companies to appoint a board member to champion the subject at this level) and the publication and HSC advice about reporting on health and safety performance to stakeholders. Proposals about reforming the law on Corporate Manslaughter, although not aimed at directors as individuals, have also sharpened the focus on top-level responsibilities for managing health and safety risks.

Getting directors on board is obviously crucial but arguably what actually delivers a sustainable shift in health and safety management at ground level is the full engagement of people who are actually exposed to hazard and risk. This theme goes back well before the Robens report of 1972 to publications such as the Report of the Joint Industrial Council on Accident Prevention of 1956 (and before that to numerous other reports on improving safety and health in mines and factories). Whatever the adherents of the ‘command and control’ philosophy of management might want to imagine, managing health and safety is something you can only do with people and not to them. Not only are workers a massive store of knowledge on what actually goes on in the workplace (and a huge reservoir of expertise which no sane manager can ignore) but no change in technology, standards or methods of work can be successfully introduced without the agreement and positive support of those who will be directly involved or affected. Long before notions about ‘safety culture’ were revived around the world in the wake of the Chernobyl disaster, successful managers understood that you could not manage safety (indeed you could not manage any business outcome) by dictat. It could only be done by consent.

Building on the experience of the nationalised industries such as coal and steel (already in decline as he wrote) Robens recommended an extension of the existing industrial relations system to the health and safety field. This led eventually to the Safety Representatives and Safety Committees Regulations of 1977 which allowed recognised trades unions to appoint Safety Representatives with certain rights, including the right to paid leave for training of their choice. These regulations built on many of the existing principles underpinning ‘workmens’ inspectors’ in mines and also curiously gave the right to representatives of two named unions, the Musician’s Union and Equity, to appoint itinerant safety reps.

Because the 1977 Regulations did not implement Article 11 of the Health and Safety Framework Directive for workers who were not in recognised unions, the UK was obliged to introduce the 1996 ‘Consultation’ regulations. These require employers in such situations to find other methods of consultation, either by arranging for the election of ‘representatives of employee safety’ or by consulting each employee individually (visit [http://www.hse.gov.uk/pubns/indg232.pdf](http://www.hse.gov.uk/pubns/indg232.pdf)). Regulations were introduced for the offshore sector in 1989 (visit [Chapter 8: Consultation and employee involvement](http://www.hse.gov.uk/pubns/indg232.pdf)).
Chapter 8: Consultation and employee involvement

http://www.hse.gov.uk/pubns/indg119.pdf) to require employers to divide their workforces up into constituencies and to arrange for the election of safety reps with certain defined functions.

In support of their strategy to 2010 and beyond the HSC have issued a Collective Declaration on worker involvement (http://www.hse.gov.uk/workers/involvement/statement.htm) which RoSPA and many other key players in health and safety have endorsed. They are looking for all stakeholders to sign up, commit to the statement and work with them to bring about a fully involved workforce.

In light of the decline in trade union membership (only 7.5 million out of 17.5 million workers are now union members) the HSC have considered streamlining the law by amalgamating all these regulations into a common framework, perhaps producing something like the offshore model onshore. In the end however this has been decided against for the time being since it could be quite bureaucratic. In February the HSC approved a programme of work to take forward the commitments made in the Declaration (http://www.hse.gov.uk/aboutus/hsc/meetings/2005/080205/c16.pdf), based on a voluntary approach rather than relying on enforcement of regulations. The HSC have also established a ‘workers’ safety advisers’ (WSA) Challenge Fund designed to test the feasibility of funding WSAs, particularly as a way of providing representation and support for workers in small firms (visit http://www.hse.gov.uk/press/2005/c05005.htm). The results of bidding for the second round of funding under this scheme were announced in March and will enable the 47 influential partners and 21 WSAs that were award winners to reach out to about 20,000 workers. (An evaluation of the WSA Pilot, which came before the WSA Challenge Fund, can be accessed via: http://www.hse.gov.uk/research/rrhtm/rr144.htm) This is one only approach however and the Commission are looking at other ways of encouraging more and better involvement of workers in health and safety risk management.

The philosophy underpinning legislation in this area is that citizens at shopfloor level have a right to be involved in arrangements designed to protect them from harm and to be able to influence the management of their health and safety. Yet it is often forgotten that, while generally speaking managers and staff have a shared interest in successful accident and ill health prevention, things may sometimes look different from the employee’s end of the safety telescope. On occasions therefore employees need to have access to independent advice and advocacy from a trained safety rep who understands their particular perspective.

On the other hand the workforce involvement agenda goes much wider than arrangements for representation. It was the great Sidney Webb who, when asked what was the secret of his long and happy marriage to Beatrice responded, ‘Simple, it was decided at the beginning - I would take all the big decisions and Beatrice would take all the little decisions – with one condition, Beatrice would decide which were the big decisions and which were the little decisions!’.

Something of the same conundrum presents when involving people at work in decision making about their health and safety. Good practice suggests that employers should, for example: provide proper health and safety induction and skills training as
well as information, supervision and mentoring; and they should cover health and safety in appraisals, involve individuals and groups in risk assessments and investigations, ensure that there regular are tool box talks on health and safety, safety suggestion schemes and confidential reporting arrangements for near misses and problems. Many employers also put a lot of emphasis on behavioural safety, training safety reps as observers to counsel and gather information on those committing errors of various kinds.

This is all very important and it is all about involvement at the micro level where individuals and groups need to be valued, engaged and listened to. In reality this sort of involvement is the bedrock of a successful health and safety regime which is truly embedded in hearts and minds. Yet all too often there is a disconnect between the practical involvement of employees at this level and the engagement of employees in bigger more strategic decisions about the management of health and safety.

Arguably the challenge which many organisations still face is how to involve the workforce not just in the front line decisions which affect them (and/or their immediate colleagues) but in the decisions which involve the management of health and safety in the enterprise as a whole. Indeed, the HSC’s directors’ guidance talks very clearly about the need for them to ensure full workforce involvement on health and safety at all levels. Many senior managers however, including those who give leadership on the importance of involving workers as individuals, may not accept that it is appropriate for workforce representatives to have a hand in things like development of the corporate health and safety policy, arrangements for the provision of health and safety services and training or in the setting and review of corporate health and safety performance standards and objectives. They may accept that safety reps (suitably trained) should take part in active monitoring (inspections) or even in management system auditing but their role is seen very much as being the eyes and ears of the organisation on health and safety at ground level (and on occasions to provide backing for enforcement of key messages or even discipline). An alternative view expressed by a safety rep about the direction of corporate risk management may well be seen as ill-informed or even mischievous.

In a world where people at work are becoming ever more educated, health and safety is one area of management where such patronising attitudes are likely to be quite counterproductive. There is an increasing understanding that employees at work should be consulted about major issues which affect them, as evidenced, for example, in the EC Directive on Informing and Consulting Employees. This requires all businesses with at least 50 employees (or establishments with at least 20 employees) to put in place employee consultation arrangements to ensure that they are informed and consulted systematically, through their elected representatives, on matters affecting their jobs and their future employment prospects. Implementation is being phased by organisational size, with full implementation by 23 March 2008 (visit http://www.dti.gov.uk/er/consultation/proposal.htm).

The HSC need perhaps to commission further research to identify ways in which involvement of workers at the practical level can link with and inform consultation and partnership on ‘bigger picture’ issues. A further challenge to be faced, not least by professional health and safety organisations, is how to provide support to such people in their capacity as independent representatives of their constituents. A safety rep in
this sense ought to be seen not just as a representative of a company but a civic representative (albeit in a small way) in their own right. As such they should have access not just to training in health and safety but training in key skills such as research and advocacy and how to present the views of those that have elected/appointed them. With trades union membership increasingly becoming limited to major employers in the private, public and voluntary sectors, perhaps bodies like RoSPA, IOSH, the British Safety Council or even the local Groups network should quite deliberately be offering support services for ‘representatives of employee safety’. Many people at work who in reality may have this role do not realise it and may also find themselves being the first-aider, the fire warden and several other safety roles all wrapped up together - simply because no-one else wants the job. They need help to develop their knowledge and skills, particularly since in many smaller businesses they may be the only person with any kind of focus on health and safety at all. And there is still a massive need to provide help and basic advice to hundreds of thousands (millions perhaps) of individual employees (visit - [http://www.hse.gov.uk/pubns/hse27.pdf](http://www.hse.gov.uk/pubns/hse27.pdf) ) who work in businesses which are still failing to meet basic requirements.

Readers’ views would be welcome (rbibings@rospa.com).
There is almost universal agreement that effective involvement of workers, together with senior management leadership and access to professional advice, are three really essential ingredients for the successful management of work-related risk. After all:

- you can only do health and safety with people, not to them;
- workforce involvement in safety and health (what we term WISH) is a key part of workplace citizenship;
- WISH gives managers access to workforce knowledge and helps secure employee buy-in, including to difficult decisions; and
- WISH is essential to building a strong H&S culture.

Set against this, however, decline in trade union membership has reduced the number of workers now covered by a union appointed safety representative and there has been a very variable response to the 1996 Health and Safety (Consultation with Employees) Regulations for non-union employees. There have been useful experiments to test the idea of Workers’ Safety Advisers, but, outside the framework provided by union and TUC training and information, there is a distinct lack of services to support effective workforce consultation, for example, on corporate H&S policy matters.

The hunt is therefore again to find new approaches to meeting the WISH challenge. RoSPA has extensive experience in promoting workforce involvement in workplace health and safety, including through its training course for safety reps, through its communications such as the bi-monthly publication, Safety Express, and through its awards (including the new RoSPA WISH Trophy).

In April, with HSE funding, RoSPA ran a small workshop to identify good WISH practices in mixed and non-unionised workplaces. (We hope to be doing more such work soon in Scotland). One of the lessons to have emerged early on is that there is a need to see workforce involvement as a broad continuum: from the involvement of individuals and groups in decision-making about things that affect their health and safety directly – through to more formal consultation with employee representatives about wider and more strategic issues.

In this sense, useful as it is, the new Health and Safety Executive guidance on consultation and involvement (HSG263) might arguably have placed even more emphasis than it does on effective participation of workers in day-to-day health and safety management – both as the foundation for more structured consultation and for securing stronger and sustained management commitment, particularly at the supervisor/team leader level.

In RoSPA’s view, a much stronger emphasis is needed on the importance of participative health and safety management techniques such as toolbox talks, point-of-work risk assessments, suggestions schemes, equipment trials, behavioural safety programmes etc. We see these activities as the foundation for building a culture of involvement. Without them there is no real prospect of creating real partnership through more formal structures such as safety reps and committees.

In higher performing businesses this approach will be the everyday norm. But in many others where centralism, as opposed to pluralism and empowerment, are still the order of the day, the challenge is still to show, through practical example, that WISH really does work.

Every journey must start with a single step – and on the trail to greater workforce involvement in health and safety that fundamental reporting and involvement is the first step to true involvement.

One of the key themes in the HSE strategy for preventing death, injury and ill health in Great Britain’s workplaces is the need to reinvigorate workforce involvement in the management of H&S. RoSPA’s occupational safety adviser, Roger Bibbings, explains why encouraging workers to report near misses or unsafe acts/conditions is the first step to true involvement.
step might simply be ensuring that employees report issues such as uncontrolled hazards, near misses or unsafe acts/conditions. For if it can be shown that it’s OK to report, that workers get thanked for doing so, and that something actually happens as a result, several important steps can be taken up the WISH learning curve.

Yet, even in the most developed health and safety management regimes (and notwithstanding their personal duties in health and safety law) many workers can still fail to report things. They may feel that they:
- are not responsible for reporting;
- do not have the time;
- will not be listened to;
- might look stupid, for example, if they lack expert knowledge;
- could incur the disapproval of their colleagues;
- will be seen as causing trouble; or that they could be blamed and end up being disciplined.

More significantly, they may consider that these risks are not worth taking, especially if they feel that they are likely to encounter an apathetic (or worse still) hostile response from their immediate managers – one which might even put their future job security at risk.

It is a truism that there is usually an imbalance in organisations between position power and knowledge. Even where managers have ‘come up from the ranks’, most have to accept in practice that those they manage are a reservoir, not only of the technical knowledge necessary to deliver work but of what actually goes on (good and bad) at an operational level.

**Knowledge**

To do their job therefore, managers need to know what their subordinates know. Yet even in organisations with widely shared goals it has to be accepted that those at the bottom of hierarchies – who generally speaking lack power – are not naturally inclined to be bearers to their superiors of anything other than good news. Furthermore, if there is a lack of parity in skills and knowledge between them and their immediate superiors, the fact they know more about a particular problem (and their immediate superiors, the fact they lack expert knowledge)

- could incur the disapproval of their colleagues;
- will be seen as causing trouble; or that they could be blamed and end up being disciplined.

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To do their job therefore, managers need to know what their subordinates know. Yet even in organisations with widely shared goals it has to be accepted that those at the bottom of hierarchies – who generally speaking lack power – are not naturally inclined to be bearers to their superiors of anything other than good news. Furthermore, if there is a lack of parity in skills and knowledge between them and their immediate superiors, the fact they know more about a particular problem (and what ought to be done about it) can very often lead to more heat than light being generated. That is why it is so important, for example, for safety reps to try to offer solutions to the problems which they raise and for reps and supervisors to be trained together, at least in technical aspects of hazards and risk control. (Indeed, lack of health and safety training for supervisors is itself a major reason for a lack of WISH.) Reporting requires encouragement, empowerment and support. Of course, organisations may choose to adopt a more draconian approach which stresses the fact that employees who fail to report serious health and safety matters may face disciplinary action. We all need reminding from time to time of our responsibilities, but in a situation where a worker may already feel at risk of disapproval from his immediate colleagues and/or higher managers, how effective is it to try to offset this with an even greater threat of disciplinary action or even possibly dismissal? Such fear is the enemy of safety.

It has become quite common in many organisations to establish anonymous ‘health and safety hotlines’, for example, to allow for whistleblowing. But, while necessary as a long stop, is not encouraging anonymity in this context simply confirming the suspicion that to report is highly dangerous? Does it serve to create a sense of guarantee of action or that the reporter is valued and respected as a role model for others to emulate? And if employees will only report quite common or garden problems anonymously, does this not mean that the organisation has got much deeper cultural problems?

So acceptance of the need for reporting of problems in health and safety has got to be won by the constant repetition of key messages – such as posters which say ‘If you don’t report it, we can’t sort it!’, ‘Don’t walk by’, ‘If you stumble on an accident, report it!’, ‘If it’s unsafe, tell your supervisor’. The same messages need to be repeated constantly – but creatively – in inductions, in web-based communications and in briefings etc.

But simply proclaiming the need to report is only part of the solution. Workers need to be able to see in practice that reporting pays and here feedback on actions taken to resolve small problems can provide the confidence workers need to report bigger, more problematic issues in the future.

News of a personal letter or email sent, for example, from a senior manager to a worker at their home, thanking them for raising an issue and telling them what happened as a result of them reporting, can quickly get on the workplace grapevine and encourage others to do likewise. And it is also possible to show others beyond the business that reporting pays.

For example, Fountains PLC, one of this year’s RoSPA Sector Award winners had this in their annual report. “We focus on learning from events before anyone is hurt. In 2008 we received over 4,600 reports from front-line staff sharing their near miss and unsafe conditions…” These reports are at the core of the improvements in the operations. The case study below illustrates their potency:

“Early on in the year, during a pre-work check, a (tree) climber noticed that his karabiner, an essential piece of his climbing equipment, had a faulty barrel spring. By reporting it, all similar karabiners across the company were quarantined to ensure that no-one was putting themselves at risk. As a consequence, the manufacturer recalled all karabiners and altered their manufacturing process thus making the equipment safe not only for Fountains but also for many other climbers.”

**Action**

Encouraging reporting may seem like a statement of the blindingly obvious. Surely every business does this? Some maybe, but I suspect the majority have got some way to go to really fine tune their reporting/remediation regimes.

How many businesses, for example, have regular, team-based meetings to assign recent reports to action and to track progress of actions recently assigned?

How many have regular feedback on such actions in newsletters and bulletins and other internal communications?

How many use independent ‘expert listeners’ to get high value qualitative data from workers, for example, on safety critical incidents or major issues of concern?

And how many safety advisers are secretly reluctant to encourage more reporting because any increase in reports received will make it appear, to the casual observer at least, that things are really getting worse? (I have actually heard some businesses which will not even circulate RIDDOR data internally out of fear that such information might be viewed negatively.)

It is worth thinking about these challenges in some depth and discussing them with colleagues, because, quite apart from identifying areas in which such health and safety management processes can be improved, acceptance or resistance to innovation in this area can be a really good indicator of attitudes to workforce involvement and of health and safety culture generally.

‘Worker involvement’ is a big idea but in reality it’s all about taking one small step after another and getting each one right.
Parting Shots

Worker involvement does not happen spontaneously. The case for it needs to be made among the workforce as much as it needs to be made among managers, says Roger Bibbings, RoSPA’s occupational safety adviser.

One of the key goals in the Health and Safety Executive’s (HSE) strategy for health and safety (Be part of the solution) launched in June 2009 is the need to promote workforce involvement and consultation. This, together with director leadership and competent advice, are widely accepted as essential foundations for effective health and safety management.

There are now a series of new HSE initiatives underway to develop the whole theme of workforce involvement (www.hse.gov.uk/involvement/index.htm), so it is useful perhaps to reflect on HSE’s thinking, including where it fits with wider government action on workforce participation as set out, for example, in the recent MacLeod Review (www.berr.gov.uk/whatwedo/employment/employee-engagement/index.htm).

The HSE strategy document talks of “…genuine management/workforce partnership based on trust, respect and co-operation…” and “…combined involvement of management and health and safety representatives in inspections, investigations and risk assessments.” Although such cooperation may exist in well run businesses with active safety reps appointed by trade unions under the 1977 regulations, RoSPA’s experience suggests there are few if any Representatives of Employee Safety (RoES) elected in non-unionised workplaces. This is despite this ‘democratic’ option being available to employers under the later Health and Safety (Consultation with Employees) Regulations of 1996 (www.opsi.gov.uk/SI/si1996/Uksi_19961513_en_1.htm). And with so many businesses struggling with the effects of the recession there does not appear to be a massive appetite for taking time out to innovate in this area.

In OS&H September 2009, I discussed this issue and suggested that there was a need to build up a stronger pattern of worker involvement in non-union firms, not by invoking the ’96 regs but by concentrating on steps that could be taken to extend the kind of worker involvement that is already evident in practical, day-to-day decision making in the workplace. For the last six months, RoSPA has been holding workshops and discussions on this theme – particularly with non-unionised companies – and several lessons have emerged quite strongly.

The first is that involvement does not happen spontaneously. It needs very active leadership. Without an individual who constantly drives the issue, it will not happen by itself. That individual is most likely to be the person who has day-to-day responsibility for health and safety (usually the safety adviser) but equally, if involvement is to flourish, it also needs the strong, visible support of the MD or a senior director. ‘Visible Felt Leadership’ is much in vogue in H&S just now (see the RoSPA study Back to the Floor which examined director involvement in workplace H&S and good practice (www.rospa.com/occupational-safety/bttf)). Senior managers are key in setting expectations – not just telling workers it’s OK to speak up on H&S but also that the organisation needs and values their input. Despite this, the worker involvement workshops and discussions we have held have highlighted that there seems to be a quite weak understanding among managers, especially in SMEs, of the statutory requirement to consult workers.

Many managers would claim that they do consult employees, seeking their views ‘directly’ by various means rather than via RoES and safety committees (there are clearly many different arrangements for dialogue such as employee fora, quality circles, safety champions etc). Certainly, among the better companies there is acceptance that you need to tap into employee knowledge and get their buy-in at the operational level. But too many managers seem to think that consultation on H&S is just a matter of providing information and briefing employees on decisions already taken on matters such as standards, policies and procedures, rather than actually seeking their views and getting feedback. Consulting employees directly about bigger and more strategic issues such as policies, the H&S...
implications of organisational change, risk assessing new technology, H&S aspects of procurement, performance, targets etc tends to be seen by most managers as not approp-
ate for non-management staff ("We're paid to think, they're paid to work."). So where there is an appetite for involvement in H&S it is usually via operational techniques such as 'toolbox talks', on the job training sessions, 'safety huddles', point of work risk assessments, reporting and suggestions schemes, PPE trials etc. (There is also a lot of focus on involving employees via behavioural safety programmes which take various forms.)

Engagement

In the busy real-world of health and safety management, proposing complicated models and splitting hairs over types of involvement and engagement means little to most firms, where the emphasis is on getting people involved in some way or another. Where it works well, the case for involve-
ment is sold to the workforce and manage-
ment as integral to the company's success, not as a bolt-on. (There are few organisations that have the time and resources to indulge in worker involvement just for the sake of it!)

Too often health and safety professionals allow health and safety to be seen mistaken-
ly as a separate, regulation bound agenda and not at the heart of productivity, business continuity and employee wellbeing. How-
ever, because practical questions of health and safety go to the heart of day-to-day operations, it is impossible to disentangle them from other management challenges. So if we want to confirm the relevance of worker involvement in this area, we need to 'de-ghettoise' H&S and make it a general management/employee concern, not purely the preserve of specialists (although special-
ists are vital for support reasons).

Rather than simply listening to the case for getting workers involved, managers have to learn by 'doing and seeing' in order to appreciate what involvement is all about. Senior managers in particular need to be encouraged to take part in – and lead - front end activities such as regular walkabouts, chairing joint investigations, leading behav-
ioral safety programmes, joint safety improvement teams etc. By getting involved themselves, senior managers will discover just how such co-operation can help to pool knowledge, talents and commitment – not just to deliver better risk control – but to deliver many other kinds of improvement such as improved productivity, lower sickness absence, reduced waste, lower costs etc. And it is this sort of practical involvement by busi-
ness leaders which will provide the learning experience to help them – and others directly involved – to understand 'what good involve-
ment looks like' in practice and how and why it works.

Workforce

Getting workers involved is not without its challenges however. The case for it needs to be made among the workforce as much as it needs to be made among managers.

Employees without much position power (and who may also feel insecure) often need reassurance that it is worth it and that they will not be put at a disadvantage. Employees may need to develop better soft skills, for example, to express them-

EEs to listen to and understand what others are saying (and to reach sensible compromises). There are also general issues to consider, with a cynical old guard that is often more difficult to engage than younger workers, who generally appear more receptive to concepts of culture and involvement.

The overall organisational culture too needs to be receptive. A collaborative approach is obviously going to be easier to achieve in organisations with more open, collegiate management styles. Often collaboration around H&S issues can help to show the way to move beyond outdated command and control cultures where the ethos is still one of 'know your place' and ‘do as you are told'.

Language too is absolutely critical. Nobody thinks “how should I involve my workers” as an academic concept. They do, however, think “Bill on the milling machine might have something useful to say on that”.

Experience

Extending workforce involvement in itself appears to be fairly low down on everyone’s agenda. The reality, however, is that it is there in many day-to-day activities without anyone necessarily recognising it as such. HSE, because of its regulatory role, has tended to focus primarily on promoting compliance by employers with their duty to consult. This, HSE would argue, provides the platform for employers to develop wider employee involvement. However, as a result of work RoSPA has done via training, auditing and awards, and more recently through our exploratory worker involvement work-
shops, we see it the other way round. By strengthening and extending involvement in day-to-day health and safety management you widen horizons and create a foundation for going further and engaging workers on the bigger questions via more structured kinds of consultation.

Through our OSH awards scheme, which recognises continued excellence and imp-
ovement in health and safety performance and management (now in its 54th year), RoSPA has gained considerable insight into the wide variety of approaches that organ-
isations adopt to employee involvement. (Readers might like to look at the list of winners at: www.rospa.com to see the range of businesses whose experience may be available to others.) In particular, the RoSPA Worskplace Involvement in Safety and Health (WISH) trophy, sponsored by Springfields-Fuel, is awarded to the sector winner with the best evidence of WISH. Winners so far have included Royal Mail, Trant Construction and Northern Rail. They and other ‘higher performers’ provide a rich seam for mining good practice cases studies, often in the form of vignettes describing particular practices, many of which are directly transportable to SMEs. (Note: RoSPA now has Higher Performers Fora in Scotland and the north-west see: www.rospa.com/occupationalasafety/)

I’d be interested in receiving reactions to issues raised in this article, including how to expand involvement, overcome some of the barriers discussed here and also how to strengthen the many practical linkages between the H&S involvement/consultation challenge and the wider participation agenda in British business.