

FIRE SERVICES EXAMINATIONS BOARD

STUDY NOTE

EXAMINATION	STATION OFFICERS' EXAMINATION
PAPER	HUMAN RESOURCE MANAGEMENT
SUBJECT	HEALTH, SAFETY AND WELFARE
ITEM	HEALTH AND SAFETY MANAGEMENT
STUDY NOTE No.	3312

INTRODUCTION TO THE STUDY NOTE

This study note has been prepared as the basis of study in connection with the qualifying examinations for promotion.

Candidates will be expected to demonstrate knowledge of the information contained in the study note and understand how it should be applied:

The 'References' made at the end of the Study Note are included for information only and candidates will not be expected to study these as part of the bibliography.

HEALTH AND SAFETY MANAGEMENT

1. Health and Safety Management

There is a need for brigades to manage health and safety with the same degree of expertise and to the same standards as other core business activities, if they are effectively to control risks and prevent harm to people.

The key elements of successful health and safety management are:

- (a) Policy;
- (b) Organising;
- (c) Planning and implementation;
- (d) Measuring performance;
- (e) Reviewing performance; and
- (f) Auditing

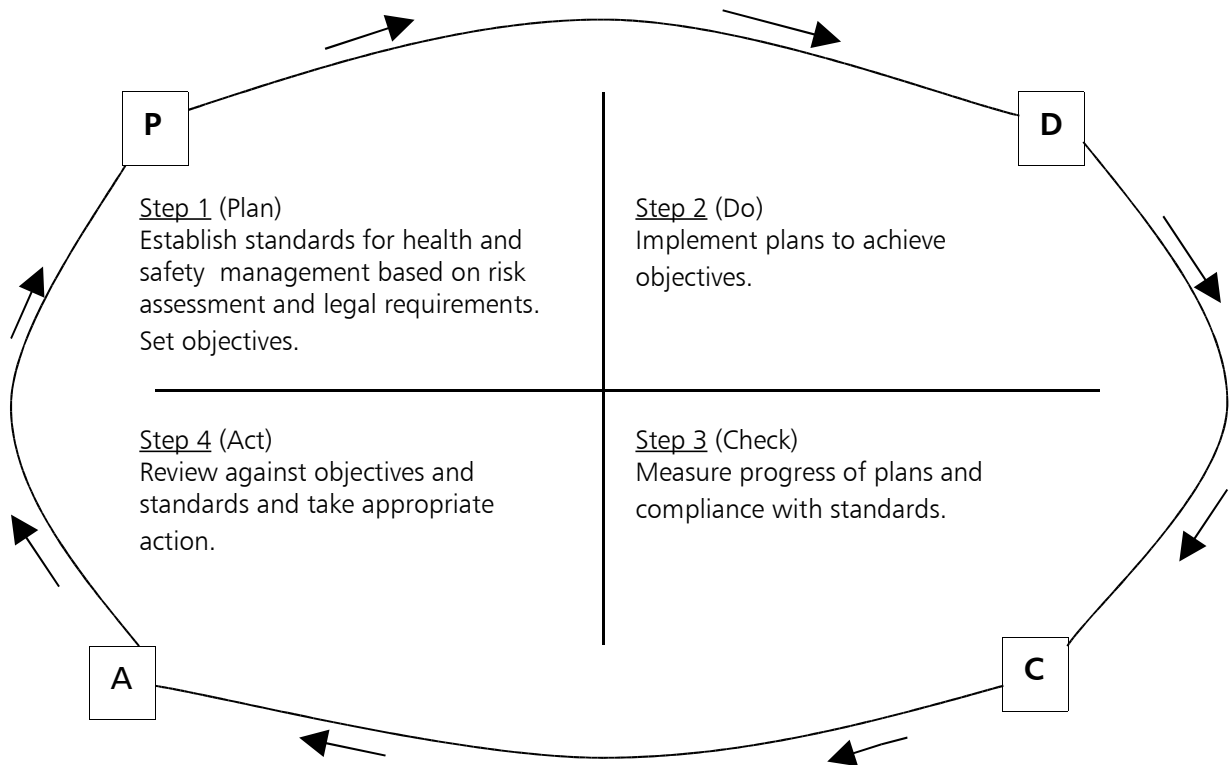
2. Policy

- (a) Effective health and safety policies set a clear direction for the brigade to follow. These will establish the general intentions, approach and objectives (the vision) of a brigade and principles upon which it bases its action. A health and safety policy should accurately reflect the values and beliefs of those who devise and implement them. The approach has to start at the top. Visible and active support, strong leadership and commitment of senior managers are fundamental to the success of health and safety management.

- (b) Quality and Health and Safety Management

A well developed approach to quality is increasingly seen as an essential activity for the successful organisation. Organisations often fail to manage health and safety effectively because they see it as something distinct from other management tasks.

Total Quality Management (TQM) promotes continuous improvement in all aspects of an organisation's activities. This is often depicted as 'Plan – Do – Check – Act' and can equally be applied to health and safety.



'Plan – Do – Check – Act' for Health and Safety

3. Organising

- (a) Organisations need to define the responsibilities of individuals and relationships to others in order to promote a positive health and safety culture, and secure the implementation and continued development of the health and safety policy. This should create a robust framework for management activity and relationships that should assist in the delivery of improved performance.

Activities necessary to promote a positive health and safety culture are split into:

- (i) Methods of control within the brigade;
- (ii) Means of securing co-operation between individuals, safety representatives and groups;
- (iii) Methods of communication throughout the brigade; and
- (iv) Competence of individuals.

(b) Control

Establishing and maintaining control is central to all management functions. Control is achieved by getting the employees to commit themselves to clear health and safety objectives. It begins with managers taking full responsibility for controlling factors that could lead to ill health, injury or loss. The arrangements start with nominating a senior figure at the top of the organisation to co-ordinate and monitor policy implementation. Health and safety responsibilities are allocated to line managers, with specialists appointed to act as advisers. If managers provide clear direction and take responsibility for the working environment, it helps create a positive atmosphere and encourages a creative and learning culture. Safety representatives can also make an important contribution. The emphasis is on a collective effort to develop and maintain systems of control before the event, not on blaming individuals for failures afterwards.

(c) Co-operation

Participation by employees will support risk control by encouraging their 'ownership' of health and policies. It establishes an understanding of their brigade as a whole and people working in it will benefit from good health and safety performance. Pooling knowledge and experience through participation, commitment and involvement means that health and safety really becomes 'everybody's business'.

It is a legal requirement for all employees in Great Britain to be consulted, not just informed about health and safety issues in the workplace that affect them. However, successful organisations often go further than strictly required by law and actively encourage and support consultation in different ways. Examples of this are:

- (i) The provision of appropriate training to Safety representatives and all other personnel to enable them to make an informed contribution on health and safety issues;
- (ii) The positive benefits of an open communications policy and being closely involved in directing the health and safety effort through the issues discussed at health and safety committees; and
- (iii) Effective consultative bodies being involved in planning, measuring and reviewing performance as well as in their more traditional reactive role of considering the results of accidents, ill health and incident investigations and other concerns of the moment.

(d) Communication

The provision of effective communication is a challenge for organisations in general, not just on health and safety issues. The messages that senior management wish to communicate after are often not the ones employees receive.

Two central elements that need to be provided by all such communications are:

- (i) A clearly visible leadership; and
- (ii) A clear expression and understanding of how and why the organisation is trying to improve health and safety.

Effective communication about health and safety relies on information:

- (i) Coming into the brigade (information input);
- (ii) Flowing within the brigade; and
- (iii) Going out from the brigade.

(e) Information Input

The brigade will need to monitor:

- (i) Legal developments to ensure that it will comply with the law;
- (ii) Technical developments relevant to risk control; and
- (iii) Developments in health and safety management practice.

(f) Information Flow within the Brigade

If the health and safety policy is to be understood and consistently implemented, the following key information will need to be communicated effectively:

- (i) The meaning and purpose of the policy;
- (ii) The vision, values and beliefs on which form its base;
- (iii) The commitment of senior management to its implementation;
- (iv) The plans, standards, procedures and systems relating to its implementation and measurement of performance;
- (v) Factual information to help secure the involvement and commitment of employees;
- (vi) Comments and ideas for improvement;
- (vii) Performance reports; and
- (viii) Lessons learned from accidents and other incidents.

Three methods can be used to provide an adequate flow of information, up, down and across. They consist of both formal and informal means, but need to be consistent with each other, especially where key messages can be reinforced by more than one method.

1. Visible behaviour

Managers can communicate powerful signals about the importance and significance of health and safety objectives. Subordinates soon recognize what their managers regard as important and act accordingly.

Successful methods which signal commitment include:

- Regular health and safety tours;
- Chairing meetings of the central health and safety committee or joint consultative body;
- Active involvement in investigations of accidents, ill health and incidents. The level of seniority in management position of those carrying out the investigation can be determined by the severity or the potential severity of the event.

2. Written communication

Among the most important written communications are:

- Health and safety policy statements;
- Organisational statements that establish health and safety notes and responsibilities;
- Documented performance standards;
- Risk control information and procedures and
- Significant findings from risk assessments.

3. Face to Face discussion

Opportunities for employees to have face-to-face discussion to support other communication activities and enable them to make a more personal contribution. They include:

- Planned meeting (team briefings) at which information can be cascaded. (These can include targeting groups of employees for safety critical tasks);
- Health and safety issues on the agenda at all routine management meetings;

- Monthly or weekly meetings at which managers can discuss health and safety issues with their teams, remind them of critical risks and precautions and supplement the brigades training effort. These also provide opportunities for employees to make their own suggestions (perhaps by brainstorming) about improving health and safety arrangements.

(g) Information flow from the brigade

It must be remembered that the brigade may need to pass health and safety information to others, including information regarding accidents or ill health to enforcing authorities.

(h) Competence

If all employees are to make a maximum contribution to health and safety, there must be proper arrangements in place to ensure that they are competent. Experience of applying skills and knowledge is an important factor and needs to be gained under adequate supervision. All employees need to be able to work in a safe and healthy manner. Managers need to be aware of relevant legislation and how to manage health and safety effectively. Good arrangements will include:

- (i) Recruitment and placement procedures which ensure that employees (including managers) have necessary physical and mental abilities to do their jobs or can acquire them through training and experience;
- (ii) Systems to identify health and safety training needs arising from recruitment, changes in staff, technology or working practices;
- (iii) Need to maintain or enhance competence by refresher training;
- (iv) Systems and resources to provide the information, instruction, training and supporting communications to meet those needs;
- (v) Arrangements to ensure the provision of competent cover for staff absences, particularly those with critical health and safety responsibilities; and
- (vi) The provision of general health promotion and surveillance schemes which contribute to the maintenance of general health and fitness.

4. Planning and Implementing

It is essential to plan the implementation of health and safety policies. The effective control of risks can only be achieved through co-ordinated action by all members of the brigade. An effective plan for the provision of health and safety requires the brigade to establish and operate a health and safety management system which:

- (a) Controls risks;
- (b) Reacts to changing demands; and
- (c) Sustains a positive health and safety culture.

The control of risks is necessary to secure compliance with the requirements of the Health and Safety at Work etc Act and the relevant statutory provisions.

There are 3 basic stages to a risk control system:

- (a) Hazard identification – identifying hazards which could cause harm;
- (b) Risk assessment – assessing the risk which may arise from hazards; and
- (c) Risk control – deciding on suitable measures to eliminate or control risk.

There are three complimentary outputs from the planning process:

- (a) Health and safety plans with objectives for developing, maintaining and improving health and safety management systems, such as:
 - (i) Each fire station and/or department having annual health and safety plans;
 - (ii) The brigade having an accident/incident investigation system; and
 - (iii) Establishing a reliable risk assessment process for operational incidents, equipment and manual handling.
- (b) A specification for management arrangements, risk control systems and workplace precautions.
- (c) Performance standards for implementing the health and safety management system.

5. Measuring Performance

In order to maintain and improve health and safety in the workplace it is necessary to audit and monitor the performance of the health and safety function.

Fire brigades need to measure what they are doing to implement their health and safety policy:

- (a) To assess how effectively they are controlling risks; and
- (b) How well they are developing a positive health and safety culture.

A low accident rate, even over a period of years, is not a positive guarantee that risks are being effectively reduced and that injuries, ill health or loss of life has effectively been controlled for the future.

Information:

There are two ways to obtain information on health and safety performance:

- (a) Active monitoring - which involves regular inspection and checking to ensure that standards are being applied and controls are working. Eg the cost of mending a broken stair is likely to be much cheaper than paying for the injuries which could result from someone falling down the stairs.
- (b) Reactive monitoring - which involves identifying system failures whether or not they result in injuries, illnesses or damage. It includes the monitoring of:
 - (i) Injuries and ill health.
 - (ii) Damage to property.
 - (iii) Near misses.
 - (iv) Hazards.

(a) Active Monitoring

This gives a brigade feedback on its performance before an accident, incident or ill health. It includes actively monitoring the achievement of specific plans and objectives, the operation of the health and safety management system, and compliance with performance standards. The information this generates will provide a firm basis for decisions about improvements in risk control and the health and safety management systems.

Active monitoring measures the degree of success achieved and can reinforce positive management actions.

Examples of different forms of active monitoring are:

- (i) Routine procedures to monitor specific objectives, eg quarterly or monthly reports or returns.
- (ii) Periodic examination of documents to check that systems relating to the promotion of the health and safety culture are being complied with. Examples might be the way in which suitable objectives have been established for each Station Manager/Section Head, a regular review of performance, the assessment and recording of development needs, and the provision of suitable development training.
- (iii) The systematic inspection of premises, plant and equipment by Station Managers and Safety Representatives or other employees to ensure the continued effective operation of workplace equipment.

- (iv) Environmental monitoring and health and safety surveillance to check on the effectiveness of health control measures and to detect early signs of harm to firefighters' health.
- (v) Systematic direct observation of work and behaviour by the Watch Managers and Crew Managers to assess compliance with procedures and rules, particularly those directly concerned with risk control.
- (vi) The consideration of regular reports on health and safety performance by the Chief Fire Officer/Firemaster and principal management team.

(b) Reactive Monitoring

Reactive systems, by definition, are triggered after an event and include identifying and reporting:

- (i) Injuries and cases of ill health; (including monitoring of sickness absence records);
- (ii) Other losses, such as damage to property;
- (iii) Incidents, including those with the potential to cause injury, ill health or loss;
- (iv) Hazards; and
- (v) Weakness or omissions in performance standards.

Each of the above provides opportunities for a brigade to check performance, learn from mistakes and improve the health and safety management system and risk control.

Information gathered from investigations is a useful way to reinforce key health and safety messages. Investigations may also provide valuable information in the event of an insurance claim or legal action.

6. Reviewing Performance

Reviewing is part of the process of making judgments about the adequacy of performance and taking decisions about the nature and timing of the actions necessary to remedy deficiencies. Brigades need to have feedback to see if the health and safety management system is working effectively as designed. The main sources of information come from measuring activities and from audits of the risk control measures.

Feeding information on success and failure back into the system is an essential element in motivating employees to maintain and improve performance. Successful organisations emphasise positive reinforcement and concentrate on encouraging progress on those indicators, which demonstrate improvements in risk control.

Reviewing should be a continuous process undertaken at different levels within the brigade and should include responses made:

- (a) By first-line or other managers to remedy failures to implement risk control measures which they have observed in the course of routine activities;
- (b) To remedy sub-standard performance identified by active and reactive monitoring;
- (c) To the assessment of plans at individual, watch/section or workplace level; and
- (d) To the results of audits.

Review plans may include the review of individuals, watch/section, station or the whole brigade, to a timetable that is appropriate.

The brigade would decide on the frequency of the reviews at each level and devise reviewing activities to suit the measuring and auditing activities and should:

- (a) Establish who is responsible for implementation; and
- (b) Set deadlines for completion.

Key performance indicators for reviewing overall performance can include:

- (a) Assessment of the degree of compliance with health and safety system requirements;
- (b) Identification of areas where the specified health and safety standard is absent or inadequate;
- (c) Assessment of the achievement of specific objectives and plans; and
- (d) Accident, ill health and incident data accompanied by analysis of both the immediate and underlying causes, trends and common features.

These indicators are consistent with the development of a positive health and safety culture. They emphasise achievement and success rather than merely measuring failure by looking only at accident data.

Brigades may also benchmark their performance by comparing accident rates and management practices and techniques with those of other brigades in order to provide a different perspective and new insights on health and safety management systems.

7. Auditing

Brigades can maintain and improve the ability to manage risks by learning from experience through the use of audits.

All control systems tend to deteriorate over time or to become obsolete as a result of change. Auditing supports monitoring by providing managers with information on how effectively the plans and the components of the health and safety management system are being implemented. It should also provide a check on the adequacy and effectiveness of the management arrangements and control measures.

Auditing is defined as:

The structured process of collecting independent information on the efficiency, effectiveness and reliability of the total health and safety management system.

Drawing up plans for any necessary corrective actions must then follow.

The aims of auditing should be to establish that:

- (a) Appropriate management arrangements are in place;
- (b) Adequate control measures exist, are implemented and consistent with the hazard profile/risks of the brigade; and
- (c) Plans are being effectively implemented.

Various methods can be used to achieve this and some components of the system do not need to be audited as often as others. For instance, an audit of the management arrangements and the overall capability of a brigade to manage health and safety need not be done as often as an audit to verify the implementation of risk control measures.

The auditing process involves:

- (a) Collecting information about the health and safety management system; and
- (b) Making judgments about its adequacy and performance.

Collecting Information:

Auditors have three information sources on which to draw:

- (a) Interviews with individuals, to gain information about the operation of the health and safety management system and the perceptions, knowledge, understanding, management practices, skill and competence of managers and employees at various levels in the brigade.

- (b) The examination of documents, assessing records, risk control measures, performance standards, procedures and instructions for completeness, accuracy and reliability together with the implications for competence and understanding – in practice these may need to be reviewed in preparing the audit to identify issues to follow up and people to interview.
- (c) Visual observation of physical conditions and work activities in order to examine compliance with legal requirements and verify the implementation and effectiveness of risk control measures.

References

Successful Health and Safety Management