# The ORR Occupational Health Programme - 18 months in

Dr Claire Dickinson – Programme Manager IOSH Rail Conference, London 22<sup>nd</sup> November 2011



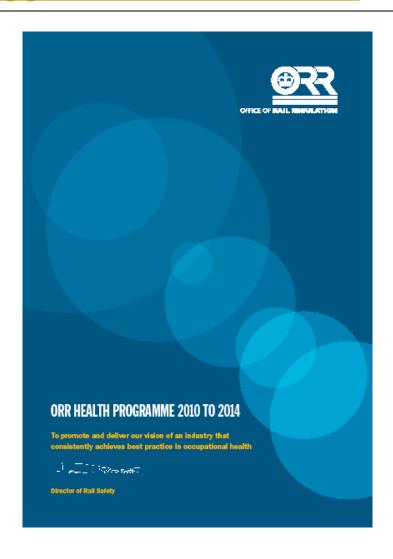
## **Purpose**

- Intent of the ORR programme
- Review the first 18 months
- What is an exemplar in occupational health



# ORR Programme – April 2010

http://www.rail-reg.gov.uk/server/show/nav.2497





### What is ORR seeking to achieve on health?

- Our vision is an industry that consistently achieves best practice in occupational health
- Our health programme aims to
  - Change how health is led and managed by organisations in the rail industry
  - Improve how health is regulated by ORR
- Key part of our achieving excellence agenda



# How to make the change?

### Leadership

Encourage industry set up a Health Leadership Forum

#### Awareness

- Incentives Reputation, publicity, recognition
- Presentations, quizzes and trade press articles
- Web information including case studies of benefits
- Working with groups, trade unions, ISLG, etc

### • Excellence in management

- Inspect companies
- Focus on health assistance and risk assessment
- Enforce where necessary and publicise



# Approach : Regulatory levers

- Monitor and intervene Find & fine
  - Cleaning of train underframes
- Require specific outcomes
  - Eliminate or ban ?Toilet waste on the track
  - Mechanisation ?Manual handling activities
- Compliance with good practice Nudging behaviour
  - Legionella/bacteria in water tanks
  - Bridge refurbishment lead, HAVS, isocyanate-based paints, musculoskeletal
- Emerging / Changing
  - RCS Silica dust suppression & control
  - Proposed Musculoskeletal Directive
  - Legal powers REACH exemptions Asbestos Regulation changes
- Regulations and guidance
  - RGD Diabetes, insulin usage and train driving





# Bridge Refurbishment: lead, isocyanate paint, vibratory tools, solvents, confined area





# Silica exposure

- HSE proposing to reduce the exposure limits to RCS
- Seeking better dust suppression
  - Washing the ballast in quarries
  - In procurement of equipment
- Better understanding of hygiene monitoring to determine the extent of risk control measures
- NR NDS established a cross industry group (ISLG) to set out good practice and promote these ways of working.



## Baseline Review

http://www.rail-reg.gov.uk/server/show/nav.2538





### Baseline paper - where is the industry now?

- Pockets of excellence but...
- Variable practice, patchy compliance with the law
- Few companies with occupational health advisor directly employed
- Strong focus on pre-employment screening, rehabilitation and managing for attendance – less on proactive ill health prevention
- Role of line manager in occupational health not fully embedded seen as role of HR or OH advisor?
- Less public visibility and accountability on health compared with worker and passenger safety
- Potential for significant economic and performance benefits from better occupational health management



### Statistical information

# Rail workers report a higher incidence of work-related ill health than similar occupation groups.

HSE Labour force survey data Self-reported illness

Railway operatives: **5850** rate per 100,000 employed

All industry: 3470

Transport: **3740** 

Transport drivers & operatives: 3510

Construction: 4800

Consultant &/or GP attendance – MSD, mental health



## ORR baseline survey on occupational health

- Survey direct to 92 dutyholders December 2010
- Seeking few baseline indicators on current state of health risk management across industry (except heritage)
- Evaluate impact ORR health programme by looking again 2014
- Good response rate 56% industry willing to engage
- Responses to be aggregated to industry level and published on our website



# What does baseline survey tell us?

- Many companies do not know how much of their sickness absence may be work related – many reported zero work related ill health absence
- Cost is a significant issue 3.5 million hours lost and £2.76 million in Employers Liability Claims alone over 12 month baseline period
- Far fewer rail employers report publicly on health than on worker and passenger safety
- Encouraging signs of recognition of need to do more on all these indicators



# Measures of occupational health management to be repeated in 2014 — annual voluntary basis

#### Excellence

- Measure of incidence of work related ill health proportion working time lost due to work related ill health
- Measure of cost of work related ill health number and value of employers' liability claims arising from work related ill health

#### Leadership

 Measure of visible leadership on occupational health – reporting publicly on health via annual reports?

#### **Awareness**

- Measure of level of reporting ill health under RIDDOR
- Hits on ORR's web pages http://www.rail-reg.gov.uk/server/show/nav.2497



# Review paper - what next?

- Key themes
  - better and more visible leadership
  - sharing of good practice
  - proactive management of ill health by line managers
  - competence in health management
- Inspection work 2011/12 to focus on key health risks, particularly stress, HAVs, plus known areas of poor compliance (COSHH, reporting)



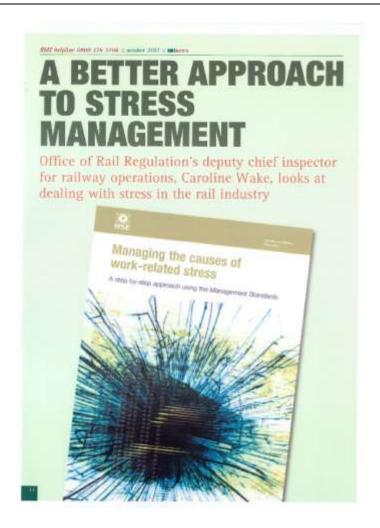
# Currently working on

- Development of a OH syllabus for managers
- Inspections on HAVS, COSHH weedkiller, construction activity
- Stress Strategy buddying, promote HSE Stress Standards organisational approach
- Working with trade union reps quiz to raise awareness
- Event with HR Community & Safety Professionals
- Influence industry via stakeholders, ISLG silica
- Railway Guidance Document on train driving when Type II diabetes
- Quarterly liaison briefs for inspectors
- Case studies to show the economic argument



## Stress Strategy

- Monitoring & Buddying Alstrom
- Safety reps short exercise
- Articles
- Presentations







About ORR

OFFICE OF RAIL REGULATION

- About the rail industry
- Health & safety regulation
- Occupational health
  - Occupational health programme
  - Formal enforcement
  - Occupational health assessment
  - Reporting occupational health cases
  - Health risks
  - Good practice examples

Home > Health & safety regulation > Occupational health > Good practice examples

#### Managing workers health - examples of good practice

The benefits of managing work-related health have been clearly demonstrated by a number of initiatives both on the railway and in similar industries. Being proactive not only protects workers health but it also benefits employers by reducing the costs and operational problems they would otherwise experience.

Examples of good practice and the health, cost and time benefits are available below and these will be added to as new examples are developed. Our aim in sharing these is to encourage the industry to improve health management and encourage a culture of excellence. If you know of any examples of good practice that could be shared as a case study please email details to ian.gooday@ orr.gsi.gov.uk.

Last updated: June 2011

#### Health case studies

Further help and information can be found on HSE's website on these and other health issues.

Learning to be resilient to stress - Transport for London (A PDF 37 Kb)

### ASLEF

## Best Practice Menopause

Women's Representative Committee









Guidance for Line Managers on the management of an employee who fails their periodic medical or who presents with performance issues related to obesity and/or associated ill health

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# What characterises an exemplar in OH management ?

- Health managed system
  - Health Policy and Objectives documented processes
  - Health Risk Management assessment, surveys, reporting
  - Health Assurance data driven, audits, performance reviews
  - Health Promotion health fairs, communications, training
- Leadership and public commitment to ill health reduction
- Informed on the cost of work related ill-health
- Credible, informed, engaged, active service provider internal or external
- Meets legal compliance and striving for excellence
- Pride and communicating to others what worked!



### What this looks like

- More proactive approach to health
- Raised awareness at managerial/supervisory level
- Designing out health risks in equipment reduced reliance on ppe
- Reduce the gap between practice and compliance level
- Raised awareness of good practice, health hazards and risk control
- Good risk assessments to establish risk controls, e.g. paper mask versus air-fed helmets
- More informed position to target and set priorities
- Greater use of medical science, e.g. Sleep Apnoea, Diabetes
- Collaboration and sharing of what works



### It is about

### It is not about

Evidence Pre-conceptions

Judgement False precision

Consistency Uniformity

Dialogue with the company Silence

Challenge Acceptance of the status quo

Sustained improvement Short term fixes

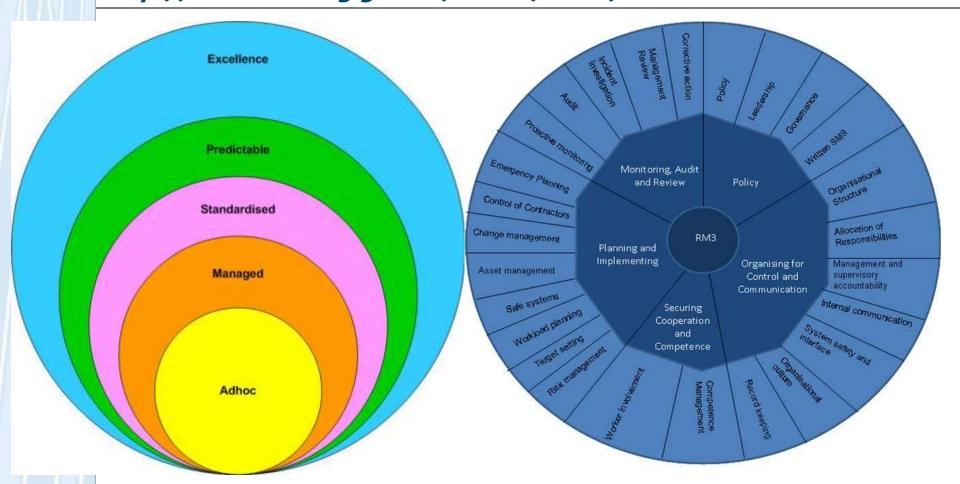
Openness For ORR only

Targeting interventions Labelling as "pass" or "fail"



# **OH Management Maturity**

http://www.rail-reg.gov.uk/server/show/nav.1098





### Conclusion

- Positive progress starting to emerge across the industry
- Signs of leadership
- More company/group action plans strategic thinking
- More considered risk control being discussed in some parts of the industry
- More discussions, commitment and activity
- Need to maintain the momentum Keep going!

