Common Sense
Common Safety

A report by Lord Young of Graffham to the Prime Minister following a Whitehall-wide review of the operation of health and safety laws and the growth of the compensation culture
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David Cameron
Prime Minister
Foreword by the Prime Minister

Good health and safety is vitally important. But all too often good, straightforward legislation designed to protect people from major hazards has been extended inappropriately to cover every walk of life, no matter how low risk.

As a result, instead of being valued, the standing of health and safety in the eyes of the public has never been lower. Newspapers report ever more absurd examples of senseless bureaucracy that gets in the way of people trying to do the right thing and organisations that contribute to building a bigger and stronger society. And businesses are drowned in red tape, confusion and the fear of being sued for even minor accidents.

A damaging compensation culture has arisen, as if people can absolve themselves from any personal responsibility for their own actions, with the spectre of lawyers only too willing to pounce with a claim for damages on the slightest pretext.

We simply cannot go on like this. That’s why I asked Lord Young to do this review and put some common sense back into health and safety. And that’s exactly what he has done.

I hope this review can be a turning point. Lord Young has come forward with a wide range of far reaching proposals which this Government fully supports. We’re going to curtail the promotional activities of claims management companies and the compensation culture they help perpetuate. We’re going to end the unnecessary bureaucracy that drains creativity and innovation from our businesses.

And we’re going to put a stop to the senseless rules that get in the way of volunteering, stop adults from helping out with other people’s children and penalise our police and fire services for acts of bravery.

Instead, we’re going to focus regulations where they are most needed; with a new system that is proportionate, not bureaucratic; that treats adults like adults and reinstates some common sense and trust.

Now we need to act on this report and I am delighted that Lord Young has agreed to remain as my advisor on these important issues; to work with departments and all those with an interest in seeing his recommendations put into effect.

David Cameron

October 2010
Lord Young of Graffham

The Rt Hon the Lord Young of Graffham PC DL graduated from University College London before becoming a solicitor. He spent a year in the profession before moving on to run a number of successful businesses. He became Secretary of State for Employment in 1985 and in 1987 became Secretary of State for Trade and Industry and President of the Board of Trade. He was Executive Chairman of Cable and Wireless plc from 1990 to 1995 and thereafter Chairman of Young Associates Ltd, which invests in new technologies.
It may seem unusual to commence a review of health and safety with the state of litigation in the country but I believe that a ‘compensation culture’ driven by litigation is at the heart of the problems that so beset health and safety today. Last year over 800,000 compensation claims were made in the UK while stories of individuals suing their employers for disproportionately large sums of money for personal injury claims, often for the most trivial of reasons, are a regular feature in our newspapers.

While the ubiquitous media reports may cause little more than a raised eyebrow to the reader they hide a serious point; the perception of a compensation culture results in real and costly burdens for businesses up and down the country. Today there is a growing fear among business owners of being sued for even minor accidents.

And it’s not just a media phenomenon; the rise of claims management companies over the last decade has had a dramatic impact on the way we perceive the nature of compensation. When laws were amended to allow ‘no win, no fee’ agreements with lawyers, it led to aggressive and, I believe, wholly inappropriate advertising. Now we are subject to a barrage of adverts every time we switch on the television and radio. Today accident victims are given the impression that they may be entitled to handsome rewards just for making a claim regardless of any personal responsibility – adding to a real sense that we live in an increasingly litigious society.

It’s a climate of fear compounded by the actions of some health and safety consultants, many without any professional qualifications, who have a perverse incentive to take an overzealous approach to applying the health and safety regulations. As a consequence they employ a goal of eliminating all risk from the workplace instead of setting out the rational, proportionate approach that the Health and Safety at Work etc Act demands. It is a problem exacerbated by insurance companies, some of whom insist on costly and unnecessary health and safety risk assessments from external consultants before they will even consider offering accident insurance policies to small and medium sized businesses.

Together these factors combine to create a growing view that ‘if there’s a blame, there’s a claim’ and any claim means financial recompense. At the same time lawyers are incentivised to rack up high fees secure in the knowledge that they will be charged to the losing party. It is hardly surprising that many organisations seek to mitigate their liabilities with excessively risk averse policies.

And it’s a fear that not only blights the workplace but almost every walk of life – from schools and fetes, to voluntary work and everyday sports and cultural activities. It was with this in mind that the Prime Minister, when he was still Leader of the Opposition, asked me to investigate the
compensation culture, alongside our health and safety regime. My appointment as the Prime Minister’s advisor on these issues was reconfirmed once the Coalition Government took office.

Clearly, it is right that people who have suffered an injustice through someone else’s negligence should be able to claim redress. It a basic tenet of law and one on which we all rely. What is not right is that some people should be led to believe that they can absolve themselves from any personal responsibility for their actions, that financial recompense can make good any injury, or that compensation should be a cash cow for lawyers and referral agencies.

It is my firm belief that the UK’s compensation system should focus on delivering fair and proportionate compensation to genuine claimants as quickly as possible – not fuelling expectations that injury means automatic compensation regardless of the circumstances.

The recommendations in this review are designed to deliver the necessary reforms to achieve this. The aim is to free businesses from unnecessary bureaucratic burdens and the fear of having to pay out unjustified damages claims and legal fees. Above all it means applying common sense not just to compensation, but to everyday decisions once again.

I am also committed to ensuring that the recommendations in my report are put into place. All too frequently reports of this nature are left to gather dust on the shelves of Whitehall, so I have agreed with the Prime Minister that I will continue in my role to deliver all the reforms identified as being necessary.

The Rt Hon the Lord Young of Graffham

October 2010
‘The aim is to free businesses from unnecessary bureaucratic burdens and the fear of having to pay out unjustified damages claims and legal fees. Above all it means applying common sense not just to compensation but to everyday decisions once again.’
The 1974 Health and Safety at Work etc Act has provided an effective framework for businesses and individuals for almost 40 years. Today we have the lowest number of non-fatal accidents and the second lowest number of fatal accidents at work in Europe. In my review of the workings of this Act, none of my recommendations applies to hazardous occupations where the present system, although probably overly bureaucratic, is nevertheless effective in reducing accidents at work.

Despite the success of the Act, the standing of health and safety in the eyes of the public has never been lower, and there is a growing fear among business owners of having to pay out for even the most unreasonable claims. Press articles recounting stories where health and safety rules have been applied in the most absurd manner, or disproportionate compensation claims have been awarded for trivial reasons, are a daily feature of our newspapers.

All this is largely the result of the way in which sensible health and safety rules that apply to hazardous occupations have been applied across all occupations. Part of the responsibility lies with the EU where the Framework Directive of 1989 has made risk assessments compulsory across all occupations, whether hazardous or not, and part to the enthusiasm with which often unqualified health and safety consultants have tried to eliminate all risk rather than apply the test in the Act of a ‘reasonably practicable’ approach.

Businesses now operate their health and safety policies in a climate of fear. The advent of ‘no win, no fee’ claims and the all-pervasive advertising by claims management companies have significantly added to the belief that there is a nationwide compensation culture. The ‘no win, no fee’ system gives rise to the perception that there is no financial risk to starting litigation; indeed some individuals are given financial enticements to make claims by claims management companies who are in turn paid ever-increasing fees by solicitors. Ultimately, all these costs are met by insurance companies who then increase premiums. However, any employer not covered by accident insurance faces bankruptcy, which encourages them to follow every recommendation of their health and safety consultant, no matter how absurd.

The system for claiming compensation is a growing industry in itself. Indeed concerns became such that in 2008 the Master of the Rolls asked Lord Justice Jackson to conduct a review into the costs of litigation. I fully endorse the recommendations that he has made.

The incentives for claiming compensation have to change. The system must be fair and proportionate without placing an excessive financial burden on the losing party. Claimants have a legal right to make fair and reasonable claims without undue bureaucracy. I propose that the scheme recently introduced for road traffic accidents be extended to cover straightforward personal injury claims. This will deliver a simple, cheaper and quicker resolution of claims. I also propose tighter regulation of advertising by claims management companies.

My report highlights the role that the Health and Safety Executive (HSE) and local authorities have in promoting a common sense approach to health
and safety. Their role is pivotal in ensuring that businesses, schools and voluntary organisations can operate in a way where health and safety is applied in a proportionate manner.

I propose that the HSE develop downloadable checklists to reassure organisations operating in low hazard environments that they are meeting their legal obligations and managing risk so far as is reasonably practicable. This is an interim solution, for I recommend that we go back to the European Commission and negotiate a reduction of burdens for low hazard environments. Indeed, if we do not, there is a real risk that the Commission will wish to impose these obligations on firms employing five or fewer, who are currently excluded.

Fears of facing legal action after failing to manage risk appropriately often encourage organisations to use the services of costly health and safety consultants. Currently there are no qualification standards for health and safety consultants and, as a result, they often adopt an overcautious approach. This can lead to excessive and unwarranted costs to business and the voluntary sector or to the unnecessary cancellation of events on health and safety grounds. I recommend that health and safety consultants be accredited and that processes are in place to ensure that assessments are proportionate.

In instances where local authorities have adopted an overzealous approach towards health and safety, I recommend that the public should be allowed an appeal process and appropriate recompense. The role of the Local Government Ombudsman may need to be strengthened to achieve this.

The insurance industry also bears part of the responsibility for the over-interpretation of health and safety legislation. I will work with the industry to ensure that the approach I propose is considered sufficient for the purposes of insurance. I have asked the industry to draw up a code of practice to prevent burdens falling disproportionately on small businesses and the voluntary sector.

This disproportionate approach has also had a negative impact on education in this country and has decreased the number of opportunities available to children to experience risk in a controlled environment, especially through school trips and competitive sport. My proposals aim to ease the administrative burden on teachers that the current health and safety regime has brought about to ensure that children do not miss out on important experiences.

The HSE, local authorities and private organisations must work in partnership to make the system simpler. I propose that systems are simplified where possible, such as by local authorities combining food safety and health and safety inspections. The results of inspections should be publicly available, enabling consumers to make informed choices.

Furthermore, organisations must provide advice which is clear and consistent and which is easily accessible to businesses, voluntary organisations and schools. Unpicking the system and freeing it from bureaucracy are the best enablers of an effective health and safety system without unnecessarily risking injuries or lives. If necessary, we should challenge legislation on a European level to achieve this.

A full list of my recommendations is available on pages 15–17.
Summary of recommendations

Compensation culture

• Introduce a simplified claims procedure for personal injury claims similar to that for road traffic accidents under £10,000 on a fixed costs basis. Explore the possibility of extending the framework of such a scheme to cover low value medical negligence claims.

• Examine the option of extending the upper limit for road traffic accident personal injury claims to £25,000.

• Introduce the recommendations in Lord Justice Jackson’s review of civil litigation costs.

• Restrict the operation of referral agencies and personal injury lawyers and control the volume and type of advertising.

• Clarify (through legislation if necessary) that people will not be held liable for any consequences due to well-intentioned voluntary acts on their part.

Low hazard workplaces

• Simplify the risk assessment procedure for low hazard workplaces such as offices, classrooms and shops. The HSE should create simpler interactive risk assessments for low hazard workplaces, and make them available on its website.

• The HSE should create periodic checklists that enable businesses operating in low hazard environments to check and record their compliance with regulations as well as online video demonstrations of best practice in form completion.

• The HSE should develop similar checklists for use by voluntary organisations.

• Exempt employers from risk assessments for employees working from home in a low hazard environment.

• Exempt self-employed people in low hazard businesses from risk assessments.

Raising standards

• Professionalise health and safety consultants with a qualification requirement that all consultants should be accredited to professional bodies. Initially the HSE could take the lead in establishing the validation body for qualifications, working with the relevant sector and professional bodies. However, this function should be run by the professional bodies as soon as possible.

• Establish a web based directory of accredited health and safety consultants.

Insurance

• Insurance companies should cease the current practice that requires businesses operating in low hazard environments to employ health and safety consultants to carry out full health and safety risk assessments.

• Where health and safety consultants are employed to carry out full health and safety risk assessments, only qualified consultants who are included on the web based directory should be used.
• There should be consultation with the insurance industry to ensure that worthwhile activities are not unnecessarily curtailed on health and safety grounds. Insurance companies should draw up a code of practice on health and safety for businesses and the voluntary sector. If the industry is unable to draw up such a code, then legislation should be considered.

Education
• Simplify the process that schools and similar organisations undertake before taking children on trips.
• Introduce a single consent form that covers all activities a child may undertake during his or her time at a school.
• Introduce a simplified risk assessment for classrooms.
• Shift from a system of risk assessment to a system of risk–benefit assessment and consider reviewing the Health and Safety at Work etc Act 1974 to separate out play and leisure from workplace contexts.

Local authorities
• Officials who ban events on health and safety grounds should put their reasons in writing.
• Enable citizens to have a route for redress where they want to challenge local officials’ decisions. Local authorities will conduct an internal review of all refusals on the grounds of health and safety.

Citizens should be able to refer unfair decisions to the Ombudsman, and a fast track process should be implemented to ensure that decisions can be overturned within two weeks. If appropriate, the Ombudsman may award damages where it is not possible to reinstate an event. If the Ombudsman’s role requires further strengthening, then legislation should be considered.

Health and safety legislation
• The HSE should produce clear separate guidance under the Code of Practice focused on small and medium businesses engaged in lower risk activities.
• The current raft of health and safety regulations should be consolidated into a single set of accessible regulations.
• The UK should take the lead in cooperating with other member states to ensure that EU health and safety rules for low risk businesses are not overly prescriptive, are proportionate and do not attempt to achieve the elimination of all risk.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
• Amend the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995, through which businesses record workplace accidents and send returns to a centralised body, by extending to seven days the period before an injury or accident needs to be reported.
• The HSE should also re-examine the operation of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 to determine whether this is the best approach to providing an accurate national picture of workplace accidents.
Working with larger companies

• Undertake a consultation with the intention of having an improved system with an enhanced role for the HSE in place for large multi-site retail businesses as soon as practicable.

Combining food safety and health and safety inspections

• Combine food safety and health and safety inspectors in local authorities.

• Make mandatory local authority participation in the Food Standards Agency’s Food Hygiene Rating Scheme, where businesses serving or selling food to the public will be given a rating of 0 to 5 which will be published in an online database in an open and standardised way.

• Promote usage of the scheme by consumers by harnessing the power and influence of local and national media.

• Encourage the voluntary display of ratings, but review this after 12 months and, if necessary, make display compulsory – particularly for those businesses that fail to achieve a ‘generally satisfactory’ rating.

• The results of inspections should be published by local authorities in an online database in an open and standardised way.

• Open the delivery of inspections to accredited certification bodies, reducing the burden on local authorities and allowing them to target resources at high risk businesses.

Police and fire services

• Police officers and firefighters should not be at risk of investigation or prosecution under health and safety legislation when engaged in the course of their duties if they have put themselves at risk as a result of committing a heroic act. The HSE, Association of Chief Police Officers and Crown Prosecution Service should consider further guidance to put this into effect.

Adventure training

• Abolish the Adventure Activities Licensing Authority and replace licensing with a code of practice.
Compensation culture

In 2006 the House of Commons Constitutional Affairs Committee’s report into the compensation culture concluded that people perceive Britain to be a far more litigious society than it was 10 or 20 years ago. This culture creates a climate of fear and encourages organisations to attempt to eliminate all risk, even though this is an unattainable goal. Furthermore, a blame culture has developed in which, rather than accepting that accidents can and do happen, somebody must always be at fault and financial recompense is seen to make good any injury. While there is of course a need for those injured as a result of negligence to receive adequate damages, the legal process must be proportionate and not unduly costly.

Britain’s ‘compensation culture’ is fuelled by media stories about individuals receiving large compensation payouts for personal injury claims and by constant adverts in the media offering people non-refundable inducements and the promise of a handsome settlement if they claim. It places an unnecessary strain on businesses of all sizes, who fear litigation and are subjected to increasingly expensive insurance premiums.

The problem of the compensation culture prevalent in society today is, however, one of perception rather than reality. The number of claims for damages due to an accident or disease has increased slowly but nevertheless significantly over recent years. Furthermore, there is clear evidence that the public believes that the number of claims and the amount paid out in damages have also risen significantly.

The cost of litigation is a burden for both the private and the public sectors. There is considerable evidence of the disproportionate nature of damages in relation to claimants’ costs. Leading insurers are currently paying some costs at a rate of over 100% of the damages payable.

In 2009/10 the NHS Litigation Authority (NHSLA) paid out nearly £297 million in damages on claims closed in that period. On the same claims, the NHSLA spent a total of £163.7 million on legal costs, of which 74% went to claimants’ lawyers and 26% to its own lawyers. Some of this money could be better spent on healthcare.

Access to justice

If there is one law that Parliament cannot repeal it is the law of unintended consequences, and it is the unintended consequences of well meaning legislation that are at the root of our problems today. The Access to Justice Act 1999 brought about three major changes in the compensation landscape. These were the introduction of conditional fee agreements (CFAs), the growth of after the event (ATE) insurance and the proliferation of claims management companies. The shift towards increased fears of litigation can be seen to have its roots in these changes. The 2006 report concluded that problems lay in the public’s increased awareness that it was possible to sue without any financial risk. The changes encouraged the belief that claiming compensation for even the most minor of accidents is quick and easy, while at the same time incentivising lawyers to rack up high fees in the knowledge that they will be covered by the losing party.
Conditional fee agreements

The CFA is one of the most common forms of ‘no win, no fee’ agreement, where the lawyer will only be paid if the claim is successful. The lawyer will also be entitled to an extra fee (known as a success fee): the losing party normally pays both lawyer’s costs and the success fee in whole or in part. There are some costs and disbursements not covered by a CFA, and the lawyer can arrange for these to be covered by an ATE insurance policy.

ATE insurance policies cover litigants against any future liability for an opposing party’s costs. Sometimes they also cover liability for other fees and disbursements. If the action is lost the insurance company covers the costs of the premium, but if the action is won the ATE insurance premium is recoverable from the losing party.

Referral fees and claims management companies

Referral fees are paid by solicitors to third parties who acquire business for them. Solicitors were permitted to pay referral fees through changes to the Law Society rules in 2004. Since then, there has been tremendous growth of claims management companies, including those directly run by firms of solicitors. This in turn has led to a massive increase in adverts on the radio and television targeting people who might have a claim for an accident or personal injury. These firms promise to investigate the facts and assess whether or not there are grounds for a claim, and if there is, undertake to act for the claimant on a ‘no win, no fee’ basis.

Furthermore, many adverts entice potential claimants with promises of an instant cheque as a non-returnable bonus once their claim is accepted – a high pressure inducement to bring a claim if ever there was one.

Such companies then proceed to auction any claim that appears well founded to the solicitor who will pay the most. Quite apart from encouraging litigation in circumstances when it might not otherwise occur; claims go to the solicitor who pays the most, rather than the one most suitable for the client – sometimes even if their practice is far away from their client.

Figures from the Legal Services Board suggest that lawyers who pay referral fees can receive up to 100 times as much work as those who do not. It is little surprise then that fees have risen from £250 per case in 2004 to up to £800 per case today. Evidence from the insurance industry shows that over 15% of the total cost of a claim goes to pay for referral fees and adds nothing to a claimant’s damages. This burden cannot be sustained, especially given the constant increase in referral costs.

Last year both the Law Society and the Bar Council recommended that referral fees be stopped, on the grounds that they have the potential to limit access to justice and reduce the quality of legal services on offer. Others, such as the Legal Services Board, argue that there is little evidence of this. I am in no doubt that the payment of referral fees and the accompanying culture that sees claimants rewarded before the legal process has even begun creates a climate in which businesses, the public sector and even voluntary and charity organisations fear litigation for the smallest of accidents, and then manage risk in accordance with this fear.

The regulation of claims management companies

The Better Regulation Task Force’s Better Routes to Redress report of 2004 identified a need for claims management companies to be regulated. Particular concerns raised about the sector in the report and elsewhere were the use of aggressive marketing techniques, encouraging frivolous claims, misleading consumers about funding options, providing poor quality advice and dropping claims when they were not thought to be financially lucrative.

After the industry’s attempts at self-regulation failed, the Ministry of Justice launched the Claims Management Regulator in April 2007. Personal injury is the largest sector it regulates, with over 1,500 businesses. The market is estimated to be worth nearly £300 million per annum. Meanwhile, the advertising spend for ‘no win, no fee’ companies is worth around £40 million per annum.
All claims management companies must register with the Claims Management Regulator, although certain statutory exemptions apply. Businesses are required to follow rules that prevent them from cold calling and engaging in high pressure selling, and which require them to provide written information on how to pursue a claim and the costs involved, allow a 14-day cooling off period and operate a customer complaints scheme. The rules outlaw misleading marketing and require companies to adhere to the standards laid down in the advertising codes overseen by the Advertising Standards Authority and the Direct Marketing Association’s direct marketing code of practice.

However, in my view the regulations do not go far enough: they allow companies and personal injury lawyers to advertise in such a way that encourages individuals to believe that they can easily claim compensation for the most minor of incidents and even be financially rewarded once a claim is accepted. I have written to the Claims Management Regulator to express my concern that the current regulations simply do not go far enough to control the damaging actions of these companies. I have written in similar terms to the Solicitors Regulation Authority, which has the responsibility for oversight of those solicitors that act in a similar way to claims management companies. Copies of these letters are attached at Annexes G and H.

I particularly feel that the system needs to go further and do more to control both the volume of advertising that such companies produce and also the content of these adverts. Indeed, advertising can be seen as one of the key factors in driving a fear of litigation. A Department for Constitutional Affairs report on the effects of advertising with regard to personal injury claims from March 2006 suggests that as a direct consequence of advertising by claims management companies, almost 90% of people surveyed believe that there are more people receiving payments for personal injury than five years previously.1

Alongside claims management companies, personal injury lawyers themselves are also directly responsible for a large amount of advertising. In my view they are every bit as much of a problem as claims management companies.

I have written to Lord Smith, the chair of the Advertising Standards Authority, to ask for a review of some of the advertising of claims management companies and personal injury lawyers to ensure that the advertising code is strictly adhered to – particularly in relation to the social responsibility provision. A copy of my letter is at Annex I.

The Jackson Report

In 2008 fears over the spiralling of litigation costs prompted the Master of the Rolls to ask Lord Justice Jackson to investigate the situation. After an extensive enquiry lasting over a year, his final report was published in January 2010.

He recommended that CFA success fees and ATE insurance premiums should cease to be recoverable from the losing party in litigation. This would not prevent the use of ‘no win, no fee’ arrangements as such, but would limit the costs for which the losing side would be liable. In order to ensure that claimants still received appropriate damages (for example to cover medical expenses after paying the success fee for which claimants would now become liable), Lord Justice Jackson proposed that the amount of ‘general’ damages payable be increased by 10% and that the amount that can be claimed in success fees by the lawyer be capped at 25% of any settlement (excluding damages for future care and loss). Lord Justice Jackson also proposed a ban on referral fees.

Lord Justice Jackson also recommended that lawyers should be able to enter into contingency fee agreements, also known as damages based agreements (DBAs). Under these, a lawyer would take on the case on a ‘no win, no fee’ basis and would take a pre-agreed share of any damages

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1 Effects of advertising in respect of compensation claims for personal injuries, Department for Constitutional Affairs, March 2006.
if they were successful, but nothing if they failed. Thus if a lawyer agreed to take a quarter of any award and the claimant was awarded £100,000, the solicitor would receive £25,000 and no more. If the claim is unsuccessful the lawyer does not receive payment.

Lord Justice Jackson also recommended that before the event insurance (BTE) be extended. This is insurance that often comes as an optional add-on with a motor or household insurance policy, and although it is not suitable today (a mechanism for preventing vexatious or frivolous claims will have to be devised), the practicability of a national scheme should be investigated. Extending BTE insurance might be a fair solution to the problem of access to justice. I propose consulting with the insurance industry on developing stand-alone BTE policies suitable for individuals, as well as on how to best develop policies for small businesses.

The Ministry of Justice is holding a consultation into the implementation of the Jackson Report’s proposals around CFAs and DBAs in the early autumn. I warmly welcome this consultation. It is my firm belief that the Government should adopt Lord Justice Jackson’s proposals as soon as possible. I am also aware that the Legal Services Board is currently undertaking a major investigation into referral fees, including a public consultation. I very much welcome this and recommend that the Government consider the results of this investigation alongside the outcome of the consultation on Lord Justice Jackson’s other recommendations.

Extension of the Road Traffic Accident Personal Injury Scheme

As well as the introduction of Lord Justice Jackson’s proposals, I recommend extending the current Road Traffic Accident Personal Injury Scheme put in place by the Ministry of Justice to include other personal injury and lower value clinical negligence cases. This may greatly simplify the claims process, reduce the time taken to agree damages and result in reduced costs for all parties.

The NHSLA is currently responsible for handling both clinical and non-clinical negligence cases on behalf of the NHS. In 2009/10, the NHSLA received 6,652 claims and potential claims (where an individual states their intention to claim but does not do so at that point) under its clinical schemes, and 4,074 claims and potential claims in respect of its non-clinical schemes.

Lower value claims (£1—£25,000) under the NHSLA’s largest scheme have an average settlement time of just over six months, although around 4% of cases received by the NHSLA go to court. Total legal costs incurred in connection with NHSLA clinical claims closed in 2009/10 amounted to £163.7 million. To my mind, the current system is too costly, and it takes far too long for some medical negligence cases to be resolved. Unfortunately, the adoption of the Jackson proposals will not in itself substantially shorten the process.

The recently introduced Road Traffic Accident Personal Injury Scheme provides a model of how an effective system should work. This scheme was developed at the request of stakeholders and is funded by the insurance industry. It delivers fair compensation by way of a simple procedure to any claimant making a low value personal injury claim, although it does not provide for standardised damages. The whole process is broken down into three straightforward stages, delivered to a fixed timetable. For each stage there are fixed costs, recoverable by the claimant solicitor at the end of each stage.

The Road Traffic Accident Personal Injury Scheme also has the advantage of being accessible online through an industry-led web portal, allowing the secure exchange of electronic information. This represents a significant shift from the previous paper-based process and provides cost and resource benefits for both the insurance and claimant industries.

I therefore propose that we should explore the possibility of extending the framework of the Road Traffic Accident Personal Injury Scheme to low value clinical negligence claims. I believe that such a move could reduce costs, as it would involve capping fees and would speed up the overall claims process. It would also introduce a clear and user-friendly scheme that would minimise the amount of time people spend off work and in receipt of benefits while awaiting payment of damages.
The Department of Health has already considered new approaches to the handling of low value clinical negligence claims. The NHS Redress Act 2006 missed an opportunity to improve fundamentally the way that clinical negligence claims are handled. It should have focused on improving the fact-finding phase prior to pursuit of a claim in order to facilitate faster resolution of claims and leaving it to the parties concerned, or ultimately the courts, to determine cases not resolved by the fact-finding. The Department of Health is currently considering ways to improve fact-finding as a means to speed up claims settlement and reduce costs.

If proposals can be developed along these lines, the Department of Health should also consider how these improvements relate to my recommendation to explore how the Road Traffic Accident Personal Injury Scheme framework could be extended to low value clinical negligence claims.

I recognise that the Road Traffic Accident Personal Injury Scheme will need some modification in procedures if it is to be extended to a wider range of compensation claims. It will also be necessary to monitor any changes to the scheme to ensure that they do not place an unnecessary financial burden on the insurance industry. One change I think would be beneficial would be to look at the current upper limit for cases and examine the option of increasing this to £25,000. Many millions of pounds would be diverted from legal costs to health delivery annually if we do this right. One of the incidental but important advantages of the adoption of this scheme will be the vastly reduced scope for advertising that a scale fee system will deliver.

**Good samaritan clause**

One of the great misconceptions, often perpetuated by the media, is that we can be liable for the consequences of any voluntary acts on our part. During winter 2009/10, advice was given on television and radio to householders not to clear the snow in front of their properties in case any passerby would fall and then sue. This is another manifestation of the fear of litigation. In fact there is no liability in the normal way, and the Lord Chief Justice himself is reported as saying that he had never come across a case where someone was sued in these circumstances.

Yet this belief is particularly pernicious, as it may deter people from engaging in organised voluntary activities in the mistaken belief that they can be sued should anything go wrong. People who seek to do good in our society should not fear litigation as a result of their actions.

Popular perception is that it could be dangerous to volunteer; largely because in the USA good samaritans are often liable (and in fact doctors and other medical professionals are instructed by their insurance companies not to stop at an accident). It is important to have clarity around this issue and at some point in the future we should legislate to achieve this if we cannot ensure by other means that people are aware of their legal position when undertaking such acts.

There is no liability in such cases unless negligence can be proved.

**Compensation culture recommendations**

Introduce a simplified claims procedure for personal injury claims similar to that for road traffic accidents under £10,000 on a fixed costs basis. Explore the possibility of extending the framework of such a scheme to cover low value medical negligence claims.

Examine the option of extending the upper limit for road traffic accident personal injury claims to £25,000.

Introduce the recommendations in the Jackson Report.

Restrict the operation of referral agencies and personal injury lawyers and control the volume and type of advertising.

Clarify (through legislation if necessary) that people will not be held liable for any consequences due to well-intentioned voluntary acts on their part.
Health and safety

The current standing of health and safety in society

Health and safety is important. Over the nearly four decades since the Health and Safety at Work etc Act 1974 was passed we have built up an enviable record: today we have the lowest number of non-fatal accidents and the second lowest number of fatal accidents at work in Europe. Anybody looking at a construction site today would find it hard to recognise from a similar site only a decade or two ago, and this applies throughout all hazardous occupations.

Yet at the same time the standing of health and safety in the eyes of the public has never been lower. Almost every day the papers compete to write about absurdity after absurdity, all in the name of ‘elf and safety’ as it has become widely known.

While health and safety has become a subject for humour for the general public, for businesses it is a source of confusion. Straightforward legislation originally put in place for hazardous industries has been applied in a disproportionate way to low risk businesses. This is sometimes experienced as a ‘Kafkaesque’ web of red tape which small organisations in particular find exceptionally burdensome and costly. Indeed, in a recent survey of small businesses respondents felt that health and safety regulations were nearly twice as much an obstacle to business success as any other area of legislation.2

On the back of media stories about large compensation payouts, there is a growing fear among business owners of being sued for breaches of health and safety rules. These fears are compounded by the actions of some health and safety consultants – in the main those without any qualifications – who try to apply the test of eliminating all risk instead of proposing ‘reasonably practicable’ steps specified by the Act. Coupled with the rise of the claims management companies and their ‘no win, no fee’ agreements with lawyers, this has created a climate of fear among many owners and managers of small and medium companies.

Faced with so much litigation support readily available for claimants, the owners and managers are forced to rely completely on their insurance policies for protection, and believe that they must follow their consultant’s report to the letter for fear that their cover may be imperilled. Hence the example of the restaurant that banned toothpicks and the many other stories that so delight our media.

All these factors work together to create an adverse climate for the proper application of health and safety. To make the changes necessary to deliver reform there is a need to tackle the whole range of factors that impact both on the reality and perception of the way things currently operate. This means addressing the unnecessary bureaucracy around health and safety, the context

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of the fear surrounding the compensation culture, and the role that health and safety professionals, the insurance industry, claims management companies and lawyers play. All these are interdependent and need to be addressed together if real change is to be achieved.

Quite outside the world of business, many are the reports of activities and events banned by local authorities, sometimes at short notice, in the name of health and safety. Here the citizen has no right to question the decision of the official, yet often no grounds are given for that decision. This, again, puts health and safety into disrepute.

The recommendations in this section of the review are designed to bring some much needed common sense back into the application of our health and safety regulations. My aim is to free businesses from the imposition of unnecessary bureaucratic burdens and to return the proper application of health and safety to the high standing it deserves.

The role of the Health and Safety Executive

The Health and Safety Executive (HSE) plays a vital role in the promotion of health and safety. Its responsibilities span the whole spectrum of business – from the most hazardous industry to low risk environments such as offices, but in the main its activities are confined to hazardous businesses and occupations.

The focus of my review has been on ensuring that the standing of health and safety is increased from its current low base. While in recent years the HSE has made significant progress in helping to promote best practice in businesses, there is more that can be done to ensure that businesses are able to understand and comply with their responsibilities and respond in a proportionate way to health and safety requirements.

The HSE recognises that small and medium sized enterprises (SMEs) in low risk areas need to have better information and support. Over the past few years there has been a considerable improvement in the availability of guidance to businesses, for example through the HSE website. However, small businesses are still sometimes unsure of what they need to do to comply with health and safety rules. The result is that they often call upon ‘expert’ assistance in the form of health and safety consultants, who may not always recommend the least burdensome approach. It is clear that small businesses would welcome more practical, authoritative guidance on what they need to do. I believe that the HSE is in a good position and is very willing to provide this.

A particular area of uncertainty is in the preparation of risk assessments as required under health and safety law. Business needs help to understand how best to comply with these requirements in a way that is proportionate to the risks posed by their work activities. I make a number of recommendations to help achieve this.

Local authorities

There are some 3,200 local authority inspectors involved in health and safety duties. They are responsible for ensuring that health and safety regulation is applied in over a million lower risk workplaces, such as shops, offices, pubs, cinemas and residential care homes.

Local authority health and safety inspectors have the right to enter any workplace to carry out an inspection. On a normal inspection visit, one would expect an inspector to look at the workplace and check that reasonably practicable steps have been taken to avoid obvious risk. The inspector may offer guidance or advice if necessary.

In addition to inspections at business premises, local authority officials can provide advice on specific events, and often advise organisations on whether events should be held; if they think that there is a health and safety issue, they can effectively prevent the event from taking place.

There is some inconsistency across local authorities, and the rules on health and safety are not always applied with a view to a proper risk management approach. In some instances it is clear that officials are giving poor advice to organisations and individuals, who are in turn prevented from running an event (for example a school fete) when there is no legitimate reason not to on health and safety grounds. However,
there is no requirement to put these reasons in writing and the specific grounds for the decision are often not made transparent.

There is also currently no system for appeal or redress when an event is banned or curtailed ‘for health and safety reasons’. They are simply required to accept the decision and not go ahead with the event as planned. They could also be discouraged from even planning such an event for fear or expectation that a local authority official will not allow it.

I would like to see the Government put a system in place whereby individuals have the right to ask local authority officials who ban events on health and safety grounds to put their reasons in writing.

If it transpires that the local authority officials banned an event without a legitimate reason, the Government should give individuals and organisations a route for redress where they can challenge those decisions and, if appropriate, compensate them.

**Local Government Ombudsman**

There are currently three Local Government Ombudsmen in England (each dealing with complaints from different areas of the country), one in Scotland, one in Northern Ireland and one in Wales. They make their decisions independently of all government departments, local authorities and politicians. The decision of the Ombudsman is final and cannot be appealed. However, the Ombudsman can be challenged in the High Court if it is believed that its reasoning has a legal flaw.

At present, when the Ombudsman finds that a local authority has done something wrong, it may recommend how the local authority should put it right. Although the Ombudsman cannot enforce its recommendations, most local authorities are almost always willing to act on what it says.

I believe that we should strengthen the function of the Ombudsman with regard to health and safety, such that citizens can challenge decisions made by local government officials and potentially receive damages in the light of a poor decision. If the function of the Ombudsman should still require further strengthening after this system has been put in place, then we should consider a change in legislation. This should, however, be a last resort.

**Local government recommendations**

- Officials who ban events on health and safety grounds should put their reasons in writing.

- Enable citizens to have a route for redress where they want to challenge local officials’ decisions. Local authorities will conduct an internal review of all refusals on the grounds of health and safety.

- Citizens should be able to refer unfair decisions to the Ombudsman, and a fast track process should be implemented to ensure that decisions can be overturned within two weeks. If appropriate, the Ombudsman may award damages where it is not possible to reinstate an event. If the Ombudsman’s role requires further strengthening, then legislation should be considered.

**Risk assessments in low hazard workplaces**

Low hazard workplaces are places where the risk of injury or death is minimal. These include shops, offices and classrooms. The latest figures show that only around 3% of all workplace injuries in Great Britain involve offices and that no office workers died as a result of accidents at work in 2009. The main risks encountered in a low hazard workplace include repetitive strain injury, injuries from lifting and moving things and minor slips and trips.
Nonetheless, the EC Framework Directive requires employers to carry out a written risk assessment and applies to low hazard workplaces as well as high hazard workplaces. In simple terms, this places a duty on employers to undertake and act upon a ‘suitable and sufficient’ assessment of the risks in their workplace, keep that assessment under review and communicate to their employees both the risks identified and the actions being taken.

Businesses, especially smaller ones, frequently struggle to evaluate for themselves how well they are meeting the goals set out by the regulations. A lack of specific criteria increases misunderstanding among employers about what is actually required, as does the language around the process. Although advice and guidance is provided by the HSE, it is not always easily accessible. I believe that this places undue burdens on businesses that operate in low hazard environments.

In particular, there appear to be significant differences in the cost of compliance between smaller and larger firms, with the burden falling disproportionately on smaller employers. On a per employee basis, SMEs may be spending almost six times more than larger ones on risk assessment.3

A lack of in-house expertise and the demands of insurance companies frequently mean that small businesses are forced to rely on the services of paid health and safety consultants – some of whom may not be fully qualified or even qualified at all. The fact that these consultants receive large fees creates a perverse incentive for some health and safety consultants to ‘gold-plate’ the advice they give and insist on the elimination of risk, rather than its proper management. We should all accept that health and safety in non-hazardous occupations is little more than common sense in action.

I believe that our entire approach to risk assessments needs to change across the board. We should return to the principles underlying the 1974 Act, and we could learn a lot from companies such as some large supermarkets who have adopted a system of risk management which considers the context in which hazards occur and the environment in which an employee works. By focusing on a proportionate response to risk, companies are able to protect their employees without unnecessary financial and bureaucratic burdens.

For office accommodation, including the office areas of industrial companies, and other low hazard environments such as shops and classrooms, I therefore propose that we should simplify the guidance and procedure required for a written risk assessment. This could be achieved by the HSE providing simple advice promoted through targeted communications and a downloadable checklist for risk assessments. This will provide low risk workplaces such as offices, schools and shops with a straightforward way of knowing that they have achieved the required standards to meet the goals set out in the regulations. The downloadable checklist should be extended for use within the voluntary sector, whereby organisations that employ volunteers would also have the reassurance that they have met the required standards.

In response to my review the HSE has already developed an interactive form for an office environment, accessible at www.hse.gov.uk/risk/office.htm. Most should be able to complete the form in less than 20 minutes. This will enable businesses to consider the risks for their businesses in a simple, straightforward way with the confidence that they have addressed all the requirements set out in legislation. This will obviate the need to employ external consultants to provide advice in low risk environments.

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3 An international literature review on the regulatory burdens on business found that in the USA, the UK, the European Union, Australia and New Zealand, the smallest firms of up to 20 employees could bear cost of at least 35% more, and sometimes several times higher, than the largest employers (those with 500+ employees). This review by Chittenden et al, and other studies, are referenced in Costs of compliance with health and safety regulations in SMEs, Chittenden et al, HSE Research Report 174, 2003.
An example of a typically completed form is set out at Annex L. The HSE has invited feedback about the form from businesses and other relevant stakeholders.

The intention is for similar interactive forms to be developed for shops, classrooms and the voluntary sector.

**Voluntary activities**

There is a clear need to ensure that organisations that promote voluntary activities are given as much encouragement as possible. However, health and safety is often seen by voluntary organisations as a barrier to their activities. Like small businesses, voluntary organisations often lack access to the right information. As a consequence of this there can be a tendency for voluntary organisations to take an overcautious approach when assessing risk, which sometimes results in the curtailment of worthwhile activities.

As with small and low risk businesses, the HSE can take a more proactive role in providing help and guidance through, for example, making interactive forms that are specifically tailored to voluntary organisations’ needs available through its website. This will enable voluntary organisations to be confident that they are taking a proportionate approach to health and safety issues.

Insurance companies also have a role to play in providing voluntary organisations with appropriate guidance in order to comply with their insurance requirements, and in not being overly restrictive or expensive in the cover they provide. I intend to consult with the insurance industry on how this can best be achieved.

**Periodic checklists**

To help businesses to have the confidence that they are doing what is necessary to comply with health and safety rules, the HSE should develop a simple periodic checklist for low hazard workplaces. This checklist would provide a record of the action being taken to address risks, and would be a useful tool to demonstrate compliance in the event of litigation. The HSE should also consider putting a simple video on its website demonstrating the processes to be followed.

**Homeworkers and the self-employed**

One of the desirable changes in work practices over recent years is the increase in the number of employees working from home. However, the current system is overly bureaucratic and makes no distinction between those working on an employer’s premises and those working from home; this means that employers are required to conduct a written risk assessment even if an employee is working from their own home with low hazard equipment. To my mind this approach is unnecessary and intrusive. I therefore propose to exempt employers from risk assessments for all employees working in their own homes.

Self-employed people are best placed to make decisions about themselves and their business. At present the Government, in relation to risk assessments, also applies the full rigour of health and safety legislation to the self-employed, even though it is not required to do this by the EC Framework Directive. I recommend that we should leave it to self-employed individuals to choose whether to provide written risk assessments unless they are occupied in a manufacturing, construction or industrial activity or are using hazardous chemicals or otherwise posing a potentially serious risk to others through their work activity.
Low hazard workplaces recommendations

Simplify the risk assessment procedure for low hazard workplaces such as offices, classrooms and shops. The HSE should create simpler interactive risk assessments for low hazard workplaces, and make them available on its website.

The HSE should create periodic checklists that enable businesses operating in low hazard environments to check and record their compliance with regulations as well as online video demonstrations of best practice in form completion.

The HSE should develop similar checklists for use by voluntary organisations.

Exempt employers from risk assessments for employees working from home in a low hazard environment.

Exempt self-employed people in low hazard businesses from risk assessments.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) places a duty on employers to alert the enforcing authorities (HSE’s Incident Contact Centre) to workplace accidents if a death or major injury has occurred, an employee or self-employed person is unable to perform their normal work for three days or more due to injury, or if an employee has been absent from work for over three days, or if a member of public has been injured and taken to hospital.

Currently, where an employee is absent from work for three days following an accident or injury at work, a RIDDOR report is required. However, I would increase that period to seven days, which would coincide with the requirement for individuals to obtain a fit note from their GP if their absence from work is expected to last more than a week. This would ensure that a person who has suffered a reportable injury has had a professional medical assessment.

Injuries lasting longer than three days would continue to be recorded through the explicit requirement for employers to use accident books. Businesses would see a significant reduction in the number of reports they need to make; it would also improve the accuracy of national statistics.

RIDDOR can often be seen as a cumbersome system, and compliance is estimated at around 50%. There is evidence from the HSE of under-reporting of RIDDOR, which makes me question its successful operation. Additionally, the data that RIDDOR captures can be obtained from other sources.

I therefore further recommend that the HSE re-examine the operation of RIDDOR to determine whether this is the best approach to providing an accurate national picture of workplace accidents.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 recommendations

Amend the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995, through which businesses record workplace accidents and send returns to a centralised body, by extending to seven days the period before an injury or accident needs to be reported.

The HSE should also re-examine the operation of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 to determine whether this is the best approach to providing an accurate national picture of workplace accidents.
Raising standards

Since the introduction of the 1974 Act the scope of workplace health and safety has grown considerably. There is now a complex network of sources of health and safety support to which businesses can turn. Often these are outside the direct control of the HSE or local authorities.

It is only large organisations that have the skilled resources to take a proportionate approach based on risk. Many SMEs do not have the knowledge or skills to be able to take this approach, and instead rely on more prescriptive solutions that are not necessarily best suited to their individual needs. This in turn leads many low risk businesses and SMEs to look to health and safety consultants to provide the expertise they assume they lack.

It is estimated that there are more than 1,500 specialist health and safety consultancy firms in the UK. As well as the Institute of Occupational Safety and Health (IOSH) (the largest, with over 37,000 members), there are other professional bodies such as the Association of Occupational Health Nurse Practitioners; the British Occupational Hygiene Society; the Chartered Institute of Environmental Health; the Institute of Ergonomics and Human Factors; and the International Institute of Risk and Safety Management. These may all have members operating as consultants in some aspect of health and safety. Depending on their size and sector; between 20% and 70% of businesses currently pay for support on health and safety requirements. According to recent analysis, the market for health and safety support is worth over £700 million and possibly as much £1 billion in annual sales. In particular, services to SMEs are a key growth area.

Despite this, there are currently no minimum standards for health and safety consultants and the National Examining Board in Occupational Safety and Health National Certificate can be taken after a ten-day course. Employers’ experiences of consultations are variable: in some instances they could undertake in-house evaluation more easily or take action, on the advice of consultants, that is not required by law and adds no benefit to workplace health and safety.

I therefore propose that there should be minimum qualification standards for health and safety consultants; this should also include the requirement of some years of experience in the industry.

This could be done by establishing professional qualification standards for health and safety consultants. The HSE could initially take the lead in establishing a validation body for these qualifications working with the relevant sector and professional bodies; however, the scheme could ultimately be run by an independent professional body and be self-financing.

There should be a consultation to agree these standards, which for consultants could be at the level of chartered status (that is, a qualification at the higher level, degree equivalent, with a minimum of two years’ post-qualification experience and the requirement to be engaged in mandatory continuing professional development). The system of qualification should include the obligation to provide proportionate advice to clients and have an appropriate disciplinary code in place to deal with any non-compliance with this requirement. For those employed by businesses as health and safety officers an optional lower qualification at technician level should be introduced. I hope that the validation body would be established within months and be fully operational within a year.

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Once this new system has been established, it should fall to the Trading Standards Institute to police unqualified consultants to ensure that business has access to the right level of qualified expertise. In addition, the scheme for accreditation of consultants should include a robust disciplinary code to ensure that professional standards are maintained.

The HSE should also maintain a web based directory of qualified health and safety consultants which can be accessed by all.

Legislation may be required to vest the responsibility for not only the setting of standards of admittance to the list of consultants, but also the responsibility for the behaviour of consultants in the field (analogous to the way the Law Society supervises solicitors). However, the health and safety professional bodies should be given the opportunity to demonstrate that a scheme for professional standards can operate effectively before going down the path to legislation.

**Raising standards recommendations**

Professionalise health and safety consultants with a qualification requirement that all consultants should be accredited to professional bodies. Initially the HSE could take the lead in establishing the validation body for qualifications, working with the relevant sector and professional bodies. However, this function should be run by the professional bodies as soon as possible.

Establish a web based directory of accredited health and safety consultants.

**Insurance**

There is evidence of some insurance companies requiring that a full health and safety risk assessment be prepared by external consultants before they will consider offering insurance policies to some SMEs. This is not a universal approach, and a number of companies, including some of the largest, are content to allow business to decide how best to comply with health and safety requirements, with some insurance companies offering consultancy advice free of charge where this is needed.

I recommend that insurance companies actively reconsider the practice of routinely requiring business to employ health and safety consultants, as it creates an unnecessary burden on businesses and increases costs without bringing any tangible benefits. However, if businesses choose to employ consultants, I recommend that they only employ qualified consultants who are included in the web based directory. This can only succeed if insurance companies agree to my recommendation, and I am therefore writing to the Association of British Insurers (ABI) for their support in taking this forward. A copy of my letter is at Annex J.

I further recommend that insurance companies, perhaps through the ABI, be charged with drawing up a code of practice on health and safety; this can give businesses, including the voluntary sector, reassurance that they have complied with the appropriate levels of health and safety and the ability to obtain insurance without having to employ the services of a health and safety consultant. If the industry is unable or unwilling to do this, I propose legislating to ensure that non-compliance with this stipulation cannot be used as an excuse to refuse to meet claims, so long as the company has met their obligations under health and safety legislation.
Insurance recommendations

Insurance companies should cease the current practice that requires businesses operating in low hazard environments to employ health and safety consultants to carry out full health and safety risk assessments.

Where health and safety consultants are employed to carry out full health and safety risk assessments, only qualified consultants who are included on the web based directory should be used.

There should be consultation with the insurance industry to ensure that worthwhile activities are not unnecessarily curtailed on health and safety grounds. Insurance companies should draw up a code of practice on health and safety for businesses and the voluntary sector. If the industry is unable to draw up such a code, then legislation should be considered.

Working with larger companies

By and large, the inspection work of the HSE and local authorities is efficiently organised, with the HSE taking on high hazard industries such as manufacturing sites, chemical and oil sites and those involving noxious chemicals while the local authorities deal with low hazard sites. Multi-site businesses may elect to deal with local authorities by way of the Primary Authority Scheme, which enables a company with outlets across the country to deal with one principal authority to agree the standards that will be applied on all their premises.

The Primary Authority Scheme was introduced by the Local Better Regulation Office in April 2009, and around 300 partnerships have been established to date, covering over 20,000 premises nationwide. The scheme is designed to reduce the risk of inconsistent enforcement action taken against multi-site businesses. The scheme means that actions like prosecution and fines may not be taken against a business where this conflicts with advice that it has been given by its specific local authority.

Within these limits, the scheme has been successful, but it has had insufficient impact on the inspection regime. One of the intentions behind the scheme was to remove inconsistencies here as well, but the specific provisions have limited ‘teeth’. Businesses and the primary authority may draw up an inspection plan, but there is little obligation on other local authorities to comply with it.

Feedback to the review from some large multi-site food retailers suggests that the scheme has not yet delivered consistent inspection in practice.

I believe that we need to tackle this issue. The existing statutory framework underpinning the inspection plan provisions could be strengthened, with an enhanced role for the HSE.

I therefore propose a consultation with the intention of having an improved system in place as soon as practicable.

Combining food safety and health and safety inspections

Each year over one million people suffer from food poisoning, more than 20,000 are hospitalised because of it and 500 die as a result of it. There are areas where the work of food standards and health and safety coincide, and local authorities send out inspectors dealing with both. There are undoubtedly efficiency savings to be achieved by combining both roles, and some authorities are already doing this.

Food hygiene is a devolved matter, and local authorities have the responsibility to inspect restaurants and other places that serve food to the public, as well as supermarkets and smaller food shops, on a frequency basis depending on the risk assessment of the premises. Unless the inspection results in the premises being closed,
the public may be unaware of the outcome of these inspections.

This autumn the Food Standards Agency (FSA), in partnership with local authorities, is launching a national scheme called the Food Hygiene Rating Scheme, where the result of each inspection is classified between 0 and 5 and made available to the public. I strongly support the work that is being done by the FSA, as I believe that such a scheme should be deployed on a national basis. Although I welcome the move to introduce greater local decision making and accountability in public services, in this case I believe that consistency is essential for this approach to be effective. A mandatory national food hygiene rating scheme will deliver the maximum benefit to consumers and minimise the costs to businesses, so this single scheme must be rolled out across all local authorities.

I welcome the FSA’s decision to drop the unfortunate title ‘scores on the doors’, which has been used in the past for this initiative, and its decision to drop the use of stars, which have a connotation of cost and service. I am pleased that they have decided instead to use a simple numerical scale with appropriate descriptors (as shown on page 35). These decisions were based on the results of independent research with consumers and this is what they found to be clearest and easiest to use (Annex F illustrates how the ratings will be displayed to the public).

Local authorities will publish the results of all inspections online, in an open and standardised way, so that members of the public can check the ratings of any restaurant or food shop.

The scheme also offers responsible local and national media an important information source to consider when reviewing food businesses. I believe that businesses that fail to achieve a ‘generally satisfactory’ rating should not benefit from media publicity; indeed, the challenging spotlight of the media will encourage them to improve.

Harnessing media and consumer power in this way, as the FSA plans to do, should not make it necessary to require compulsory display of ratings. However, I believe that it would be appropriate to review the success of voluntary display after 12 months and, if necessary, make display compulsory – particularly for those businesses that fail to achieve a ‘generally satisfactory’ rating. It is important that the scheme is successfully up and running in readiness for the increased number of tourists that the London 2012 Olympic and Paralympic Games will attract.

I am pleased that the national scheme recognises that if a restaurant or a shop has made significant efforts to improve then they should be able to request an additional inspection. I believe that this should be at their own cost, and that this will lead to competitive pressure to raise standards.

Furthermore, there is an opportunity to reduce costs to local authorities by opening the delivery of food hygiene inspections to nationally accredited private organisations. This would allow local authorities to concentrate their resources on businesses that present a significant risk to public health.

Similar hygiene rating schemes have already been successfully running in Los Angeles since 1997, and a range of different local schemes are currently operating in a number of local authorities in the UK. Researchers from Stanford University found that restaurant grading improved from 25% at ‘A’ level in 1996 to 50% at ‘A’ level in 1998. Revenues for ‘grade A’ restaurants improved by 5.7%; revenues for ‘grade C’ restaurants dropped by 0.7%. Most importantly, there was a 20% drop in the number of people being admitted to hospital for food related illnesses.

It is clear that the FSA’s Food Hygiene Rating Scheme will do much to improve existing standards without adding bureaucracy or burdens on business.
Combining food safety and health and safety inspections recommendations

Combine food safety and health and safety inspectors in local authorities.

Make mandatory local authority participation in the Food Standards Agency’s Food Hygiene Rating Scheme, where businesses serving or selling food to the public will be given a rating of 0 to 5 which will be published in an online database in an open and standardised way.

Promote usage of the scheme by consumers by harnessing the power and influence of local and national media.

Encourage the voluntary display of ratings, but review this after 12 months and, if necessary, make display compulsory – particularly for those businesses that fail to achieve a ‘generally satisfactory’ rating.

The results of inspections should be published by local authorities in an online database in an open and standardised way.

Open the delivery of inspections to accredited certification bodies, reducing the burden on local authorities and allowing them to target resources at high risk businesses.

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Police and fire services

The Health and Safety at Work etc Act 1974 and the Police (Health and Safety) Act 1997 apply to all duties undertaken by the Police Service and Fire and Rescue Service. The Acts protect employees and ensure that activities carried out do not adversely affect the health and safety of other people. Employees are expected to take reasonable care of themselves and others. However, it is the nature of the job that individuals may occasionally put themselves at risk to save the life of someone else. Where this happens the last thing that should be contemplated is a prosecution for non-compliance with health and safety legislation.

The HSE has engaged in joint work with the Association of Chief Police Officers, Police Authorities and Fire and Rescue Authorities to identify how a balance can be struck between high risk operational duties and the health and safety of themselves and others. As a result of this work, statements and guidance were drawn up for both the Police Service and the Fire and Rescue Authorities: Striking the balance between operational and health and safety duties in the Police Service and Striking the balance between operational and health and safety duties in the Fire and Rescue Service. I support this approach.

Where an unfortunate incident occurs and an officer puts him or herself at risk in the line of their duty to protect the public, I take the view that it would not be in the public interest to take action and investigate under health and safety laws.

However, at present, there is some ambiguity in such cases, and there is a clear need for certainty in this important area.

I recommend that a common sense approach is applied to give police officers (including Police Community Support Officers) and firefighters reassurance that they will not be investigated or prosecuted for undertaking an act of heroism. This policy should be reinforced through the HSE, Association of Chief Police Officers and Crown Prosecution Service issuing further guidance that should put this into effect.
It is important to recognise that individuals have personal choices to make and they may choose not to put themselves at unreasonable risk. However, those officers who go the extra mile and put themselves in harm’s way to protect the public should continue to be recognised and rewarded for their bravery.

**Police and fire services recommendation**

Police officers and firefighters should not be at risk of investigation or prosecution under health and safety legislation when engaged in the course of their duties if they have put themselves at risk as a result of committing a heroic act. The HSE, Association of Chief Police Officers and Crown Prosecution Service should consider further guidance to put this into effect.

**Adventure training**

The Adventure Activities Licensing Scheme, which was established through the Activity Centres (Young Persons’ Safety) Act 1995, covers young people under the age of 18 and applies to paid provision of four categories of adventure activities: caving, climbing, some water-sports and some trekking. It does not cover activities provided by schools to their own pupils where the 1974 Act applies. Nor does it apply to activities provided by voluntary associations to their own members, or young people accompanied by their parents or legal guardians.

The licensing regime, which is the responsibility of the HSE, is seen as a cost and burden on business that adds little to the health and safety of young people undertaking adventure activities. The HSE believes that effective enforcement of the requirements of the 1974 Act and the Management of Health and Safety at Work Regulations is sufficient. The licensing regime is narrowly focused on a limited number of outdoor activities and does not reflect the wide range of adventure activities now available.

The running costs of the scheme are around £750,000 and the cost of a licence is £715. This seems to me to be a disincentive to new entrants to the adventure activity market, especially to small companies.

I would recommend that we abolish the licensing of adventurous activities through the Adventure Activities Licensing Authority and instead introduce a code of practice that the HSE will oversee and monitor. The HSE should also ensure that those planning trips can feel confident that a provider is compliant with the code. Since this is a devolved issue, I will work with the devolved administrations on taking forward this initiative in Scotland and Wales.

There are no additional costs associated with the repeal of relevant legislation. Removal of licensing would allow businesses to make financial savings and focus on management of the whole range of available activities. In addition, there would be savings associated with the dismantling of the licensing regime.

**Adventure training recommendation**

Abolish the Adventure Activities Licensing Authority and replace licensing with a code of practice.

**Educational visits**

Educational visits are defined as all academic, sporting, cultural, creative and personal development activities that take place away from the student’s school, making a significant contribution to the learning and development of those participating.

There have been a number of cases where schools have prevented pupils from taking part in educational visits citing health and safety as the reason for non-participation.

The process for taking children on educational visits involves a huge amount of form-filling – ranging from consent forms to risk assessments – and the valuable time of education officials including the school governors, the head teacher, group leaders and the educational visits coordinator.
This process can involve excessive bureaucracy that is not proportionate to the role it plays in reducing the risk of accidents. It merely serves as a deterrent and an excuse to ‘do nothing’.

As a consequence, children are potentially missing out on vital education because schools just do not have the time and resource to carry out the process and, if they do, they are too concerned about the threat of legal action should an accident happen.

We should simplify the process that schools and similar organisations undertake before taking children on trips. We should introduce a single consent form, signed by a parent or guardian, which covers all activities a child may undertake during their time at a school, enabling parents to opt out of any specific activities. Consent is already not required for activities which take place during the school day and in order to reduce the amount of bureaucracy around school trips we should underline this message to schools and local authorities.

Finally, we should introduce a simplified risk assessment for classrooms which could be made available on the HSE website. The website could also provide checklists for areas in which a fuller risk assessment is required, such as sports facilities, laboratories and workshops.

I believe that with regard to children’s play we should shift from a system of risk assessment to a system of risk–benefit assessment, where potential positive impacts are weighed against potential risk. These ideas inform the play programme developed by the Department for Education and Department for Culture, Media and Sport and I would like to see them developed more widely. Furthermore we should consider reviewing the Health and Safety at Work etc Act to separate out play and leisure from workplace contexts.

**Children’s play areas**

A further area of concern is the impact of health and safety on children’s play areas. In legal terms, play provision is guided by the Health and Safety at Work etc Act. There is a widely held belief within the play sector that misinterpretations of the Act are leading to the creation of uninspiring play spaces that do not enable children to experience risk. Such play is vital for a child’s development and should not be sacrificed to the cause of overzealous and disproportionate risk assessments.

This is a further example of how legislation primarily conceived to be applied in a hazardous environment is being brought into an environment for which it is unsuited with damaging consequences.

**Education recommendations**

- Simplify the process that schools and similar organisations undertake before taking children on trips.
- Introduce a single consent form that covers all activities a child may undertake during his or her time at a school.
- Introduce a simplified risk assessment for classrooms.
- Shift from a system of risk assessment to a system of risk–benefit assessment and consider reviewing the Health and Safety at Work etc Act 1974 to separate out play and leisure from workplace contexts.
Health and safety legislation

Legislation in Great Britain

In 1972 Lord Robens’ report reviewed health and safety laws and championed the idea of a risk-based approach by employers. He advocated a system where managers were responsible for deciding how health and safety should be controlled and managed in their organisations.

The Health and Safety at Work etc Act, introduced in 1974, embedded the Lord Robens principles into law, removed the more prescriptive legislation and brought legislation such as the Factories Act 1961 and the Offices, Shops and Railway Premises Act 1963 into a single Act. The Act also combined the health and safety remit of previously disparate inspectorates under a single body and established the HSE 6 with the following functions:

- to secure health, safety and welfare of persons at work; and
- to protect persons not at work against risks to health and safety arising from work activities.

The 1974 Act includes the qualification on statutory duties of ‘so far as is reasonably practicable’ which allows a balance between risk and cost of compliance. It also provides for the HSE to produce practical guidance in the form of an Approved Code of Practice.

The HSE is responsible for the regulation of higher risk activities such as nuclear and high hazard installations (including chemical, offshore, oil and gas) and other activities (for example, working with asbestos) by virtue of the 1974 Act and other relevant statutory provisions. These include the Nuclear Installations Act 1965 (as amended), the Nuclear Reactors (Environmental Impact Assessment for Decommissioning) Regulations 1999, the Control of Major Accident Hazards Regulations 1999 and the Control of Asbestos Regulations 2006.

European law

EU member states must ensure that appropriate domestic laws, regulations and administrative measures are in place to comply with European law.

EC Framework Directive 89/391/EEC and daughter directives

Article 4 requires member states to take necessary steps to ensure that employers are subject to the legal provisions necessary for the implementation of the Directive. The Framework Directive does not prescribe the means by which member states should achieve its aims.

The Framework Directive and first six daughter directives were implemented on 1 January 1993 7 by introduction of the following regulations:

- Management of Health and Safety at Work Regulations 1999;
- Workplace (Health, Safety and Welfare) Regulations 1992;
- Provision and Use of Work Equipment Regulations 1998;
- Personal Protective Equipment at Work Regulations 1992;
- Health and Safety (Display Screen Equipment) Regulations 1992;
- Control of Substances Hazardous to Health Regulations 2002; and
- Control of Asbestos Regulations 2006.

Further Directives have been implemented including, among others: Lifts; Dangerous Substances; Ionising Radiation; Control of Major Accident Hazards (COMAH); Working Time; and Temporary Work at Height.

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6 The Health and Safety Commission and Executive merged to form the current Executive in 2008.

7 Some regulations were initially introduced in 1992 and subsequently amended and/or reintroduced.
The original Management of Health and Safety at Work Regulations (‘the Management Regulations’) came into force in 1993 as the principal method of implementing the EC Framework Directive. The original regulations have since been amended four times, most recently by the Management of Health and Safety at Work Regulations 1999.

The Management Regulations require all employers and self-employed people to assess the risks to workers and any others who may be affected by their work or business to enable them to identify the measures they need to take to comply with health and safety law. Those who employ five or more employees must record the significant findings of that risk assessment and information on any group of employees identified by it as being especially at risk.

**Does the legislation need to change?**

The Health and Safety at Work etc Act is a very good piece of legislation. It provides a clear framework for the risk driven approach to health and safety. However, since its coming into effect the compliance driven approach and prescription have continually eroded the principles of the Act’s risk based approach. This has been compounded by the introduction of EU legislation from 1992 onwards which is undoubtedly overwhelmingly compliance requirement driven rather than a tool for identifying and analysing risk to help organisations to assess their own response to health and safety needs.

There is no need for major changes to the framework provided by the Health and Safety at Work etc Act. Improvements to legislation are, of course, needed from time to time but the fundamental framework is still relevant.

Many of the problems associated with the legislation have their origins in how the legislation is interpreted and implemented. These issues need to be addressed through non-legislative reforms and elsewhere in this report a number of measures have been identified to address these.

There is also a need to make some of the regulations more accessible for businesses. The Management of Health and Safety at Work Regulations Approved Code of Practice is a legally enforceable guide for business. While it is undoubtedly comprehensive it is not particularly user friendly as it combines the actions needed in both hazardous and non-hazardous workplaces. SMEs need better targeted guidance.

I recommend that the HSE produce clear separate guidance under the Code of Practice focused on the lower risks involved with SMEs.

There is a plethora of legislation and regulations in the field of health and safety covering almost every conceivable situation to be found in a workplace. These have grown up over time; each regulation and piece of legislation was no doubt well intentioned and seen as essential at the time it was introduced. However, for businesses trying to make sense of their responsibilities it is almost impossible to understand how it all fits together. This creates uncertainty and a tendency to look to external experts for guidance where this is not required.

I recommend that the current raft of health and safety regulations is reviewed in order to consolidate them into a single set of accessible regulations. In so doing the opportunity should be taken to ensure that the consolidated regulations and guidance are framed around the principles of the 1974 Act and reflect a proportionate response to risk.

**Impact of Europe**

There is evidence that there has been significant regulation ‘creep’ over the years with the original principles of health and safety relating to hazardous environments being extended to relatively low risk activities and businesses. This is particularly the case where the EU is concerned where the tendency has been to look first at extending prescriptive regulation rather than examining ways of ensuring risk is managed in a proportionate way, focusing on process rather than outcomes.

It is clear that the additional requirements of EU legislation, particularly around the inflexibility of health and safety rules in relation to smaller businesses, create unnecessary burdens without reducing risks. The increasing amount of EU legislation in this area, some of which extends
beyond any reasonable definition of health and safety, is a cause for concern. The UK should take the lead in cooperating with other member states to ensure that EU health and safety rules for low risk businesses are not overly prescriptive, are proportionate and do not attempt to achieve the elimination of all risk.

Health and safety legislation recommendations
The HSE should produce clear separate guidance under the Code of Practice focused on small and medium businesses engaged in lower risk activities.

The current raft of health and safety regulations should be consolidated into a single set of accessible regulations.

The UK should take the lead in cooperating with other member states to ensure that EU health and safety rules for low risk businesses are not overly prescriptive, are proportionate and do not attempt to achieve the elimination of all risk.
Annex A: Terms of reference

To investigate and report back to the Prime Minister on the rise of the compensation culture over the last decade coupled with the current low standing that health and safety legislation now enjoys and to suggest solutions. Following the agreement of the report, to work with appropriate departments across government to bring the proposals into effect.
Annex B: List of stakeholder contributors

Accident Advice Helpline
Adam Smith International
Adventure Activities Industry Advisory Committee
Adventure Activity Associates
Adventure Activity Licensing Authority
Advertising Standards Authority
Advocates Library
Airmic
Asbestos Watchdog
Associated Society of Locomotive Engineers and Firemen (ASLEF)
Association for Project Safety
Association of British Insurers
Association of Chief Police Officers
Association of Personal Injury Lawyers
Association of Police Authorities
Attorney General’s Office
Aviva
Bakers’ Union Parliamentary Group
Berrymans Lace Mower LLP
Better Regulation Executive
Box Legal Limited
British Association of Leisure Parks, Piers and Attractions
British Chambers of Commerce
British Constructional Steelwork Association Ltd
British Occupational Hygiene Society
British Safety Council
Bury and Walkers LLP
Central Council of Physical Recreation
CES Group Partnership
Chartered Institute of Environmental Health
Chief Fire Officers Association
Civil Engineering Contractors Association
CO-Gas Safety
Communication Workers Union
Confederation of British Industry
Construction Skills
Construction Skills Certification Scheme
Convention of Scottish Local Authorities
Council for Learning Outside the Classroom
Countryside Alliance Foundation
Easington & Peterlee Rotary Club
East Midlands Ambulance NHS Trust
EEF
Electrical Contractors’ Association
English Outdoor Council
Essex Police
Esso
Faculty of Occupational Medicine and Society of Occupational Medicine
Families Against Corporate Killers
Federation of Small Businesses
Fire Brigades Union
Food Standards Agency
Forum of Insurance Lawyers
George Mathieson Associates
Green ICT
Greenstreet Berman
GS Partnership
Hadley Wood Joinery
Hako Machines Ltd
Health and Safety Lawyers’ Association
Hygiene World Ltd
Independent Safety Consultants Association
Industrial Injuries Advisory Council
Institute of Civil Engineers
Institute of Directors
Institute of Ergonomics and Human Factors
Institution of Occupational Safety and Health
International Institute of Risk and Safety Management
Irwin Mitchell LLP
Kennedys Law
Law Society
Legal Services Board
Local Better Regulation Office
Local Government Regulation (formerly LACORS)
London Ambulance Service
LRB Consulting
Malvern Archaeological Diving Unit
Manchester Rotary Club
Maternity Action
Medical Protection Society
Metropolitan Police
Mills & Reeve LLP
MK Consultancy Services
National Accident Helpline
National Association of Schoolmasters Union of Women Teachers
National Federation of Builders
National Trust
National Union of Rail, Maritime and Transport Workers
National Union of Teachers
NHS Litigation Authority
Osborne Clarke
Outdoor Education Advisers’ Panel
Parliamentary Advisory Council for Transport Safety
PGL
Police Federation of England and Wales
Prospect

PS Food and Safety Consultancy Ltd
Rehabilitation Council
Re:Liability (Oxford) Ltd
Royal Borough of Kensington & Chelsea
Royal College of Nursing
Royal Environmental Health Institute of Scotland
Royal Society for the Prevention of Accidents
RSI Action
Sainsbury’s
Sayfe Ltd
Scott Bader Co Ltd
Scottish Trades Union Congress
Seaward Group
SEC Group
Shires Safety Consultants
Site Safety Services
Society of Radiographers
Solace Foundation Imprint
Solicitors Regulation Authority
Swallows Research
Tesco
Thompson’s Solicitors
Trades Union Congress
Trades Union Co-ordinating Group
Travel Consultancy
UK Contracts Group
UK Fire Skills Ltd
Union of Shop, Distributive and Allied Workers
Unison
Unite the Union
United House Group
Waitrose
Wernick Buildings Ltd
Willis
Young Explorers’ Trust
Zurich

As well as the above organisations, over 100 individuals (including health and safety professionals, MPs, councillors and leading academics in the field) also responded and contributed to this review.
Annex C: Summary of stakeholder responses

General

A large proportion of stakeholders from a broad spectrum of backgrounds (CBI, TUC, NUT, Families Against Corporate Killers, Communication Workers Union, Sainsbury’s, Police Federation of England and Wales, International Institute of Risk and Safety Management, the Health and Safety Lawyers’ Association) were of the opinion that current health and safety legislation is still fit for purpose. The TUC, for instance, described the Health and Safety at Work etc Act 1974 as having been ‘probably one of the most clear and practical frameworks on health and safety anywhere in the world’ when it was introduced.

Indeed, a number pointed to the dramatic fall in fatal injuries since the introduction of the 1974 Health and Safety at Work etc Act – down from 651 to a record low of 180 in 2009. However, the majority of respondents felt strongly that there were problems of perception, interpretation and application associated with the current system, and welcomed the review. The Association of British Insurers (ABI) response was typical of these. They stated: ‘…we believe that many of the issues around health and safety are not so much the legislation themselves as misunderstandings as to how they should be applied, or excessive risk-averse guidance growing up around them’.

There was an overriding opinion that the health and safety agenda had been hijacked by the tabloid press, whose reports often contributed to misinterpretation and misunderstandings by regularly exaggerating and ridiculing instances which in reality have little or nothing at all to do with health and safety. This has not only contributed to the current low standing of health and safety in the eyes of the general public, but has also led employers and event organisers to take an approach centred on eliminating all risks, rather than employing a common sense, proportionate methodology.

Many felt too, that health and safety was frequently used as an excuse for organisations who do not want to engage in activities for a whole host of reasons. Prospect, for instance, commented that: ‘people use health and safety as an excuse to hide behind, when their motives are more about cost, petty politics or lack of spine to defend an unpopular decision’.

The difficulty in interpreting current law and understanding how to comply with regulations was a widespread complaint among stakeholders, particularly those representing business. A desire for a clearer and more accessible base of knowledge was a common request from a broad range of stakeholders (IOSH, FSB, CBI, Faculty of Occupational Medicine, British Safety Council).

There were also a number of stakeholders who felt that businesses were currently overburdened with health and safety regulations. The Federation of Small Businesses cited regulatory burden as ‘the biggest barrier to business’; the number one concern from callers to their FSB helpline was how to undertake a risk assessment. The Federation of Master Builders called for an end to the introduction of new health and safety regulations.

There was a general agreement that the rise of a compensation culture is largely a myth perpetrated by the national press. However, there was a broad consensus that the fear of being
sued drives many adverse behaviours. Consequently, there was support from a broad range of stakeholders and individuals for reform of the civil litigation process, a cap on high legal costs and reining in of the worst excesses of claims management companies.

Compensation culture
The broad consensus among stakeholders was that they did not believe there was a growing compensation culture in the UK. It is rather the public perception of one that stifles opportunities and leads business to take an overcautious attitude when attempting to interpret health and safety regulations in the workplace.

Nonetheless a significant number of stakeholders and individuals expressed concern over the operation of some claims management companies (CMCs) and, in particular, the transparency around ‘no win, no fee’ agreements. Many welcomed any moves to curtail their worst excesses and argued for a more proportionate and transparent system for compensation claims. Tesco, for instance, called for stronger regulation of compensation claim advertising and a reform of the system, to ensure that legal costs are proportionate to any settlement costs. This was a theme echoed by the Forum of Insurance Lawyers, who felt that the claims industry has driven up both costs and claims frequency and that this is affecting public perception and the behaviour of businesses. The ABI too stated that they ‘strongly support tighter regulation of CMCs, to monitor dubious practices such as encouraging fraudulent claims’. Both these organisations were among a number of organisations calling for the implementation of the recommendations relating to civil litigation costs set out in Lord Justice Jackson’s review earlier this year.

The National Accident Helpline, which provides a claims management service, noted that it supported any measures to tackle the dubious aspects of the industry, but cautioned that this must be done in a way that does not impact on those acting responsibly.

Low hazard workplaces
Complaints around the difficulty of interpreting how health and safety regulations should be applied were a common theme. The Institute of Civil Engineers, for instance, noted that interpreting what is meant by the term ‘reasonably practicable’ was one of the main causes of burdens and unnecessary costs for those working in the construction industry. Consequently, there was strong support across the board for more detailed, targeted advice on interpreting regulations and carrying out risk assessments from the Health and Safety Executive, particularly from those representing small and medium sized enterprises (SMEs).

There were also calls from a number of quarters for a relaxation of the rules around homeworkers and sole traders. The FSB, for instance, commented that there was a case for their complete exemption from current health and safety regulations; and the CBI too argued that SMEs should be exempt from certain administrative and record keeping burdens.

Education and adventure training
Measures to relax rules around adventure activities and to provide a simpler system of accreditation were broadly supported by those engaged in the provision of such activities. A number of providers expressed a desire for a more simplified system of licensing. The Adventure Activities Industry Advisory Committee, for instance, noted that current regulation was covered by ‘an incomplete, inconsistent and anomalous’ set of accreditation schemes.

Bodies representing teachers were not convinced that there should be any move to dilute current health and safety regulation relating to school trips and educational visits. However, the NASUWT did highlight the need ‘to recognise that parents and carers have a particular role to play in educating young people to be risk aware’.

Standard setting
There was broad support for measures to introduce a level of professionalism to those providing external health and safety consultation services (IOSH, CBI, Prospect, Chartered Institute of Environmental Health (CIEH), Health and Safety Lawyers’ Association). The CIEH noted that businesses need to be assured of accurate,
proportionate, competent advice from any consultants they employ, and that assessment of core competencies, including knowledge, skills and experience, is required. They pointed to their accreditation system, developed in partnership with IOSH, as a good example of how such a scheme should work.

However, there were those who sounded a note of caution. A respondent from the British Constructional Steelwork Association Ltd thought that insisting on a degree and two years’ work experience was an overreaction and may move us from a situation where there are too many consultants to one where there are too few. He suggested that endorsements from trade associations may be a better route.

**Working with larger companies**

There was backing from a number of the leading supermarkets for a single point of contact for enforcement liaison and there was strong support for greater consistency in the inspection regime.

**Police and fire services**

Proposals to exempt police and fire services from the risk of prosecution under health and safety legislation when engaged in the course of their duties and acting in the public’s interest were supported by a broad range of groups representing the emergency services. The Police Federation of England and Wales, the Association of Chief Police Officers, the Chief Fire Officers Association and the Association of Police Authorities all cited the *Striking the balance* guidelines as a model on which the review could build.
Annex D: Behind the myth: the truth behind health and safety hysteria in the media

We have all read countless media stories blaming health and safety regulations for all manner of restrictions on our everyday life, be it banning paddling pools because they could be a fire hazard, prohibiting the mowing of grass verges, sealing up post boxes or collecting firewood. Alongside these more trivial matters we read far more serious allegations about health and safety restrictions preventing members of the uniformed services from acting to save lives.

The Health and Safety Executive runs a successful ‘myth of the month’ page on its website; however, there is no end to the constant stream of misinformation in the media. Again and again ‘health and safety’ is blamed for a variety of decisions, few of which actually have any basis in health and safety legislation at all. Here we attempt to set the record straight and demonstrate that health and safety legislation already places far more emphasis on common sense than is generally perceived.

**Story**

In May 2007, newspapers published a story concerning the death of a 10-year-old boy who drowned while fishing for tadpoles with his siblings in an outdoor pond.

Questions were asked about the role of the emergency services and accusations were made that the policemen involved stood by and watched a boy drown because health and safety rules forbade them from entering the water to save him.

**Reality**

Fishermen noticed that two children had fallen into the pond and they tried to bring the children in with their fishing tackle. They managed to drag a girl out of the pond but were unable to reach her brother.

One of the fishermen tried to call 999 but was unable to get through so he called his wife. She rang the police and reported the incident. There was some confusion over the location of the incident and this resulted in the police attending the incorrect location. At the same time Police Community Support Officers were undertaking a normal patrol when they came across the incident. They alerted police officers to the correct location.

The boy’s step-father and friend arrived at the pond just before the police officers. They immediately dived into the water and brought the child to the surface. The police officers then arrived and one of them dived into the water and helped to bring the boy onto the bank. Unfortunately by this point he had been underwater for 20 minutes.

**Story**

In August 2010, newspapers reported the story of the renovation of a set of stepping stones. ‘Dovedale’s iconic stepping stones paved over in health and safety fears’ announced one headline, suggesting that they had become an ‘ugly eyesore’ after the council had levelled the stones and raised their height on health and safety grounds.
Meanwhile another newspaper suggested that ‘concrete slabs’ had been placed on the stones due to health and safety concerns and again listed comments from concerned walkers about the destruction of the original stones, which people believed had been untouched for centuries.

**Reality**

Like so many health and safety stories in the media, the renovation of the Dovedale stepping stones has nothing at all to do with health and safety.

The stones date from the Victorian era but over time had weathered and sunk down into the river bed, thereby becoming uneven. Some had sunk to such a degree that the route became inaccessible for parts of the year. The only other route across the river is via a footbridge up a narrow scree slope, which is harder to access.

The stones are on National Trust land but as they form part of a public right of way Derbyshire County Council is responsible for maintaining them. Therefore the National Trust asked the council to look at the stones. This resulted in the stones being raised to their original height. Similar renovation methods have been used in the past.

The issue here was that a public right of way had become inaccessible. It seems that the health and safety aspect of the story is a media addition.

**Story**

In April 2009 the media reported the story of a clown with the Moscow State Circus who was forbidden from wearing size 18 shoes as they posed a health and safety risk to his high wire act.

Fear of litigation was given as one of the reasons for banning the clown’s shoes and a health and safety consultant was quoted as saying ‘With health and safety you always have to think of the worst case scenario’.

**Reality**

As the media report, it was not health and safety legislation that prevented the clown from wearing shoes, but the circus he worked for and their fears of being sued. One newspaper also reported that the clown’s shoes were banned for insurance reasons.

A good attitude to health and safety is one which doesn’t focus on the worst case scenario and eliminating all risk, but one which considers risk in proportion and eliminates it so far as is reasonably practicable.
Annex E: Statistics on the rate of accidents

Notes:
• Research indicates that the rise in major injuries that took place in 2003/04 resulted from a change in recording systems (illustrated by the dotted line in the chart above). Work has been undertaken to quantify this effect and produce an adjusted time series which is also shown in the chart.
• After adjusting for the discontinuity, the rate of employee major injury reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 fell by 19% between 1999/2000 and 2008/09. The unadjusted data shows a 10% fall.

Source: HSE
Annex F: Food Standards Agency’s national Food Hygiene Rating Scheme

Businesses rated under the scheme will be given these stickers to display on their premises:
Annex G: Letter to the Claims Management Regulator

Kevin Rousell, Claims Management Regulator

Dear Kevin

Review of the operation of health and safety laws and the growth of the compensation culture

As you know I have been tasked by the Prime Minister to undertake a Whitehall-wide review of the operation of health and safety laws and the growth of the compensation culture.

In the course of my review, a number of individuals and organisations have highlighted to me the role of Claims Management Companies and the significant impact that they have had in the growing fear of litigation which is part of the rise in the compensation culture.

I am concerned that the current regulation does not go far enough to curb activities which in my view are socially irresponsible. I have observed that companies which operate within the strict letter of the existing regulations are nonetheless able to engender the belief in potential claimants that it is easy to receive large payouts for minor incidents and offer immediate financial rewards once a claim is pursued. In my view this is a high pressure sales technique if ever there was one, something which the current regulations strictly prohibit.

Furthermore, the advertisements produced by claims management companies are a cause of concern to many of those individuals and organisations providing evidence for my review. Indeed it has been put to me that these advertisements could be seen as a form of inducement to make suspect claims. Whilst these advertisements are aimed at individuals in order to encourage claims for personal injury etc they are of course seen by others, including small businesses.

The general impression they create is that, no matter how trivial or unsubstantiated a claim for damages may be, there is a firm of lawyers ready and waiting to pursue it. The impact on business, particularly small and medium sized business, is considerable. Generally these businesses do not have the resources to take on firms of lawyers making damages claims and their associated legal costs. This results in businesses operating under the fear of litigation which in turn leads them to attempt to eliminate all risk in their approach to health and safety issues, which adds considerably to business costs.

I should be grateful if you as the Claims Management Regulator could undertake a review of the code to ensure that it is sufficiently tight to curtail such damaging activity.

I am also writing in similar terms to the Solicitors Regulation Authority.

Lord Young
Annex H: Letter to the Solicitors Regulation Authority

Antony Townsend, Chief Executive

Dear Antony

Review of the operation of health and safety laws and the growth of the compensation culture

As you may know I have been tasked by the Prime Minister to undertake a Whitehall-wide review of the operation of health and safety laws and the growth of the compensation culture, particularly in relation to claims for personal injury.

In the course of my review, a number of individuals and organisations have highlighted to me the role of Claims Management Companies, including some Solicitors which act in a similar way to Claims Management Companies, and the significant impact that they have had in the growing fear of litigation which is part of the rise in the compensation culture.

I am concerned that regulation as it currently stands does not go far enough to curb activities which in my view are socially irresponsible. I have observed that companies which operate within the strict letter of the existing regulations are nonetheless able to engender the belief in potential claimants that it is easy to receive large payouts for minor incidents. Some companies also offer immediate financial rewards once a claim is pursued. I consider this to be a high pressure sales technique if ever there was one, something which the current regulations strictly prohibit.

Furthermore, the advertisements are a cause of concern to many individuals and organisations providing evidence for my review. Indeed it has been put to me that these advertisements could be seen as a form of inducement to make suspect claims. Whilst these advertisements are aimed at individuals in order to encourage claims for personal injury etc they are of course seen by others, including small businesses.

The general impression these advertisements create is that, no matter how trivial or unsubstantiated a claim for damages may be, there is a firm of lawyers ready and waiting to pursue it. The impact on business, particularly small and medium sized business, is considerable. Generally these businesses do not have the resources to take on firms of lawyers making damages claims and their associated legal costs. This results in businesses operating under the fear of litigation which in turn leads them to attempt to eliminate all risk in their approach to health and safety issues, which adds considerably to business costs.

I should be grateful if the Solicitors Regulation Authority could undertake a review of the Solicitors’ Code of Conduct to ensure that it is sufficiently tight to curtail such damaging activity.

I am also writing in similar terms to the Claims Management Regulator.

I am sending a copy of this letter to the Chairman of the Legal Services Board.

Lord Young
Annex I: Letter to the Advertising Standards Authority

Rt Hon Lord Smith, Chairman
Dear Lord Smith

Advertisements by Claims Management Companies

As you know I have been tasked by the Prime Minister to undertake a Whitehall-wide review of the operation of health and safety laws and the growth of the compensation culture.

In conducting my review, a number of individuals and organisations have highlighted to me the role of Claims Management Companies and the significant impact that their advertisements have had in the growing fear of litigation which is part of the rise in the compensation culture. In particular the growth of advertisements in the non broadcast media offering substantial up front cash payments is a cause of concern to many individuals and organisations providing evidence for my review. I attach a specific advertisement that regularly appears in the Sun newspaper from CFPI (Claims for Personal Injury); there are of course a number of similar companies advertising in this way.

It is possible these advertisements may be within the letter of the rules. However, I do not consider that they are socially responsible. These advertisements are encouraging individuals to believe that they can receive a financial reward just by making a claim. They create the impression that securing damages is a relatively easy procedure and does not provide a balanced picture of the litigation process. Whilst these advertisements are aimed at individuals in order to encourage claims for personal injury etc they are of course seen by others including small business.

The general climate they create is that no matter how trivial or unsubstantiated a claim for damages may be there is a firm of lawyers ready and waiting to pursue it. The impact of these on business particularly small and medium sized business is considerable. Generally these businesses do not have the resources to take on firms of lawyers making damages claims. This results in businesses operating under the fear of litigation which in turn leads them to take an over cautious approach to health and safety issues. All this adds to business costs.

These advertisements also appear in the broadcast media, frequently during the daytime. Their impact is as great if not greater on public perceptions of the rise in the compensation culture. However, the same issues pertain to these advertisements as those in newspapers. I understand that the code applying to broadcast media does not yet give grounds for complaints on the basis of social responsibility but that this is due to change in the near future. I would urge you to look at these television advertisements in the light of the conclusions you reach on the newspaper advertisements once the change to the code comes into effect.

I should be grateful if the Advertising Standards Authority could undertake a review of these advertisements to see whether they breach the advertising code.

Lord Young
Dear Maggie

As you will be aware the Prime Minister has asked me to undertake a Whitehall-wide review of the operation of health and safety laws and the growth of the compensation culture.

I met with your predecessor, Kerrie Kelly, and Nick Starling, Director of General Insurance and Health, on June 24th to discuss my review and the important role that the insurance industry can play in reducing the bureaucratic burden on small businesses and the voluntary sector. As you know, the costs of health and safety fall disproportionately on small and medium sized businesses, inhibiting their potential for growth and damaging the culture of enterprise in this country.

In the course of my review I have met a wide range of key stakeholder groups in the areas of health and safety and compensation. A number of common themes have emerged about the role of the insurance industry which I outline below. I would ask for your support in addressing these issues and look forward to working together to ensure that my proposals are successfully implemented.

At the heart of the problem is the dearth of accessible information about risk management that is available to small businesses and voluntary organisations. I am aware that you publish some guidance on the ABI website, however the representations I received indicate that this is insufficient to meet the needs of organisations who often cannot afford external health and safety advice.

In my report I will therefore be proposing that the insurance industry draw up a code of practice on health and safety which can give businesses and the voluntary sector reassurance that they have managed risk to an appropriate degree to obtain insurance. I would like the ABI to take a lead role in producing this code.

Over the course of my review I have become concerned that some parts of the insurance industry expect organisations in low hazard environments to eliminate all risk rather than taking the legally prescribed steps to eliminate risk so far as is reasonably practicable. I believe that this approach places an unnecessary and costly burden on small businesses and voluntary organisations.

I have received evidence that some parts of the insurance industry require full health and safety risk assessments to be prepared by external consultants before they will consider offering insurance policies. The impact of this can be significant. Indeed, an overzealous approach by health and safety consultants and the insurance industry can render it prohibitively expensive to obtain insurance, especially for one off events, with a particularly adverse impact on the voluntary sector. This may lead to events being unnecessarily cancelled ‘on health and safety grounds’ even though in reality organisers have taken reasonably practicable steps to avoid risk as set down in legislation.

Annex J: Letter to the Association of British Insurers
I accept that this practice is not universal. Some companies take a more sensible approach and are content to allow business to decide how best to comply with health and safety requirements and even offer consultancy advice free of charge where this is needed. I would like to investigate the possibility of this approach being adopted as a model of best practice throughout the industry and would ask for your help in setting up a consultation with the industry to establish the most effective way of ensuring that insurance companies provide voluntary organisations with appropriate guidance.

Furthermore, I propose in my report that the Health and Safety Executive draw up a series of downloadable risk assessment checklists for small businesses and voluntary organisations in low hazard environments. My intention is that this will serve as a means for organisations to be sure that they are meeting their obligations under health and safety law. For this to work, however, it is imperative that insurance companies also accept these forms as evidence that health and safety standards are being met.

The introduction of such checklists should negate the need for the majority of these organisations to employ external health and safety consultants. However, should organisations decide to do so, I propose that they only employ consultants who are qualified. I would like the insurance industry to support this proposal by only accepting health and safety assessments carried out by qualified consultants as valid for insurance purposes. I would like to work together with the industry to ensure that a straightforward system is developed for ensuring this is the case.

Finally, stakeholders have also expressed concerns that companies are refusing to take on work experience students due to fears that they will not be insured in the event of an accident. I would like the proposed code of practice to include reassurance to businesses that work experience students will be covered by policies they take out and that they will not be expected to meet the costs of claims themselves.

I look forward to receiving your response and to working with you on these concerns over the coming months.

Lord Young
Annex K: Letter to the Health and Safety Executive

Geoffrey Podger, Chief Executive

Dear Geoffrey

Review of the operation of health and safety laws and the growth of the compensation culture

As you know I have been tasked by the Prime Minister to undertake a Whitehall-wide review of the operation of health and safety laws and the growth of the compensation culture.

In the course of my review I have met with a number of businesses and organisations who have made representations about the Primary Authority Scheme, whereby multi-site retail businesses with outlets across the country deal with one principal authority to agree standards that will be applied on their premises throughout the UK.

Whilst I think the current scheme has been successful, there still appear to be some inconsistencies that I believe the HSE can help address. In particular, where a business and a Primary Authority draw up an inspection plan, there is no obligation for other Local Authorities to comply with it.

I am not proposing major changes to the existing framework. However, I believe it needs strengthening and I would like the HSE to lead on consulting about the best way of achieving this.

Another area on which I have received extensive representations during my review is in respect of unqualified health and safety consultants. As you know, there are currently no minimum standards for consultants and in the past unqualified consultants have been known to give advice to employers which has resulted in them taking action that was not required by law and added little or no value to the health and safety in their workplace.

One of the recommendations in my report is to introduce minimum qualification standards for health and safety consultants which include the requirement of having some experience in the industry.

My vision would be for HSE initially to take the lead in establishing a validation body for setting standards for consultants and for HSE to hand the scheme over to a self-financing independent professional body once it has been established. This body should also draw up a disciplinary code so that professional standards can be maintained and improved. Once established, I suggest that Trading Standards ensure that health and safety consultants offering advice to businesses are properly accredited.

I should be grateful if you could conduct consultation exercises to put the recommendations with regards to working with larger companies and raising standards into place as soon as possible.

Lord Young
Annex L: Example of a downloadable risk assessment form

### Office interactive assessment

<table>
<thead>
<tr>
<th>What are the hazards?</th>
<th>Who might be harmed and how?</th>
<th>What are you already doing?</th>
<th>What further action is necessary?</th>
<th>Action by who?</th>
<th>Action by when?</th>
<th>Done</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Slips and trips</strong></td>
<td>Staff and visitors may be injured if they trip over objects or slip on spillages.</td>
<td>• General good housekeeping. • Trailing leads or cables are moved or protected. • Staff encouraged to mop up or report spillages.</td>
<td>Ensure flooring is properly maintained</td>
<td>Manager</td>
<td>Monthly</td>
<td></td>
</tr>
<tr>
<td><strong>Manual handling</strong></td>
<td>Staff risk injuries or back pain from handling heavy/bulky objects, eg deliveries of paper.</td>
<td>• Trolley used to transport boxes of paper and other heavy items when collecting deliveries, etc. • Heavy items are located on appropriate shelves.</td>
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<tr>
<td><strong>Working at height</strong></td>
<td>Falls from any height can cause bruising and fractures.</td>
<td>• Stable platforms available for staff to file on high shelves. • Appropriate step ladder available for use if necessary.</td>
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<tr>
<td><strong>Well-being of workers in the office environment</strong></td>
<td>All staff could be affected by factors such as lack of job control, bullying, not knowing their role etc.</td>
<td>• Staff understand what their duties and responsibilities are. • Staff can talk to a supervisor or manager if they’re feeling unwell or ill at ease about things at work.</td>
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<tr>
<td><strong>Computers, laptops and similar equipment</strong></td>
<td>Staff risk posture problems and pain, discomfort or injuries, eg to their hands/arms, from overuse or improper use or from poorly designed workstations or work environments. Headaches or sore eyes can also occur, e.g. if the lighting is poor.</td>
<td>• Assess workstations, reduce risks and provide information and training. • Review assessment upon change of user or equipment. • Work planned to include change of activity or regular breaks. • Eye tests provided for those who need them, paid for by the employer; employer pays for basic spectacles specific for VDU use (or portion of cost in other cases).</td>
<td>Provide any further information, training or equipment as identified by the assessment</td>
<td>Supervisors</td>
<td>Within one month of assessment</td>
<td></td>
</tr>
<tr>
<td>hazards</td>
<td>Who might be harmed and how?</td>
<td>What are you already doing?</td>
<td>What further action is necessary?</td>
<td>Action by who?</td>
<td>Action by when?</td>
<td>Done</td>
</tr>
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<tr>
<td>Fire</td>
<td>If trapped, staff could suffer fatal injuries from smoke inhalation/burns.</td>
<td>• Evacuation plan drafted and tested.</td>
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<td></td>
<td></td>
<td>• Fire alarm tested regularly.</td>
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<td></td>
<td></td>
<td>• Fire drills conducted minimum of one per year.</td>
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<tr>
<td>Work equipment</td>
<td>Staff could get electrical shocks or burns from using faulty electrical equipment. Staff may also suffer injury from moving parts of equipment or unbalanced equipment.</td>
<td>• All new machinery checked before first use to ensure there are no obvious accessible dangerous moving parts, or sting of the machine does not cause additional hazards.</td>
<td>New staff to be trained to use equipment where necessary</td>
<td>Supervisors</td>
<td>Within one month of start date</td>
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<tr>
<td></td>
<td></td>
<td>• Staff encouraged to spot and report any defective plugs, discoloured sockets or damaged cable/equipment.</td>
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<tr>
<td></td>
<td></td>
<td>• Defective equipment taken out of use safely and promptly replaced.</td>
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</tr>
<tr>
<td>Cleaning</td>
<td>Staff risk skin irritation or eye damage from direct contact with cleaning chemicals. Vapour from cleaning chemicals may cause breathing problems.</td>
<td>• Cleaning products marked 'irritant' have been replaced by milder alternatives where available.</td>
<td>Ensure cleaning materials are properly stored</td>
<td>Manager</td>
<td>15.9.2010</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>• Mops, brushes and protective gloves are provided and used.</td>
<td></td>
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</tr>
<tr>
<td>Gas appliances</td>
<td>Staff could suffer from injury or ill health due to a poorly maintained gas appliance.</td>
<td>• For offices where you are responsible for maintenance: Arrangements in place for periodic examinations, eg annual check of appliances and remedial action as necessary.</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Staff encouraged to spot and report the signs of a faulty appliance.</td>
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</tr>
</tbody>
</table>

It is important that you discuss your assessment and proposed actions with staff or their representatives.

You should review your risk assessment if you think it is no longer valid or if there are any significant changes to the hazards in your office.
# Annex M: Implementation milestones

## Key Milestones

### 2010

<table>
<thead>
<tr>
<th>Month</th>
<th>Event Description</th>
<th>Category</th>
<th>Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autumn</td>
<td>Launch of Ministry of Justice’s consultation on Lord Justice Jackson’s recommendations relating to reform of civil litigation</td>
<td>Compensation culture</td>
<td>Ministry of Justice</td>
</tr>
<tr>
<td>Autumn</td>
<td>Publication of snow clearing guidance</td>
<td>Compensation culture</td>
<td>Department of Transport</td>
</tr>
<tr>
<td>October</td>
<td>Launch of simplified interactive risk assessment form for offices</td>
<td>Low hazard workplaces</td>
<td>Health and Safety Executive</td>
</tr>
<tr>
<td>October</td>
<td>Roll out of national Food Hygiene Rating Scheme by local authorities</td>
<td>Combining food safety and health and safety inspections</td>
<td>Food Standards Agency</td>
</tr>
<tr>
<td>October</td>
<td>Launch of web based database for local authorities to publish results of Food Hygiene Rating Scheme inspections</td>
<td>Combining food safety and health and safety inspections</td>
<td>Food Standards Agency</td>
</tr>
<tr>
<td>October</td>
<td>Highlighting the existing jurisdiction of the Local Government Ombudsman in the event of an event cancellation by local authority officials</td>
<td></td>
<td>Local Government Ombudsman</td>
</tr>
<tr>
<td>November</td>
<td>Launch of simplified interactive risk assessment form for classrooms</td>
<td>Low hazard workplaces</td>
<td>Health and Safety Executive</td>
</tr>
<tr>
<td>December</td>
<td>Launch of simplified interactive risk assessment form for shops (including charity shops)</td>
<td>Low hazard workplaces</td>
<td>Health and Safety Executive</td>
</tr>
</tbody>
</table>
### 2011

<table>
<thead>
<tr>
<th>Period</th>
<th>Description</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early 2011</td>
<td>Launch of consultation on implementing an improved system for assessing health and safety standards for larger companies with multiple outlets</td>
<td>Working with larger companies</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Department for Business, Innovation and Skills/Health and Safety Executive</td>
</tr>
<tr>
<td>January</td>
<td>Publish guidance for local authorities on combined health and safety and food safety inspections</td>
<td>Combining food safety and health and safety inspections</td>
</tr>
<tr>
<td>January</td>
<td>Establish a minimum standard of professional qualification for all those operating as consultants in the health and safety industry</td>
<td>Raising standards</td>
</tr>
<tr>
<td>January</td>
<td>Establish a web based directory of accredited health and safety consultants</td>
<td>Raising standards</td>
</tr>
<tr>
<td>January</td>
<td>Offer schools a single consent form that covers all activities a child may undertake during their time at school</td>
<td>Education</td>
</tr>
<tr>
<td>January</td>
<td>Introduce revised guidance on pupil health and safety including off-site educational visits and school security</td>
<td>Education</td>
</tr>
<tr>
<td>January</td>
<td>Local Government Ombudsman to expedite complaints about event cancellation in cases of particular urgency</td>
<td>Local authorities</td>
</tr>
<tr>
<td>Ongoing till June 2011</td>
<td>The Local Government Ombudsman to disseminate good practice on complaints handling to include cancellation of events</td>
<td>Local authorities</td>
</tr>
<tr>
<td>January</td>
<td>Consultation on the operation of Reporting of Injuries, Diseases and Dangerous Occurrences Regulations</td>
<td>RIDDOR</td>
</tr>
<tr>
<td>Spring</td>
<td>Launch of consultation on a draft voluntary code of practice to replace the current Adventure Activities Licensing Authority regime</td>
<td>Adventure training</td>
</tr>
<tr>
<td>Month</td>
<td>Event Description</td>
<td>Responsibility</td>
</tr>
<tr>
<td>-------</td>
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</tr>
<tr>
<td>Spring</td>
<td>Launch of consultation for reform of civil justice</td>
<td>Compensation culture</td>
</tr>
<tr>
<td>March</td>
<td>Launch of periodic checklists for use by low risk voluntary organisations to check compliance against regulations</td>
<td>Low hazard workplaces</td>
</tr>
<tr>
<td>March</td>
<td>Launch of consultation on consolidating current raft of Health and Safety legislation into a single set of accessible regulations</td>
<td>Health and safety legislation</td>
</tr>
<tr>
<td>March</td>
<td>Publication of revised guidance for police and fire officers undertaking heroic acts</td>
<td>Police and fire services</td>
</tr>
<tr>
<td>April</td>
<td>Review of Health and Safety at Work Act to distinguish play and leisure activities from workplace contexts</td>
<td>Education</td>
</tr>
<tr>
<td>April</td>
<td>Introduction of priority measures on Conduct Rules for claims management companies</td>
<td>Compensation culture</td>
</tr>
<tr>
<td>May</td>
<td>Presentation to Food Standards Agency Board of proposals for opening delivery of food safety inspections to accredited certification bodies</td>
<td>Combining food safety and health and safety inspections</td>
</tr>
<tr>
<td>June</td>
<td>Health and Safety Executive to produce clear separate guidance under the Code of Practice for small and medium sized businesses engaged in lower risk activities</td>
<td>Health and safety legislation</td>
</tr>
</tbody>
</table>
### 2012

<table>
<thead>
<tr>
<th>Month</th>
<th>Action</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>April</td>
<td>Introduce a system to allow the Local Government Ombudsman to award citizens financial compensation where local authority officials have made an incorrect decision on the grounds of health and safety and it is not possible to reinstate an event</td>
<td>Department for Communities and Local Government</td>
</tr>
<tr>
<td>April</td>
<td>Aim to introduce extended RTA Scheme to include personal injury and low value clinical negligence claims (subject to consultation) as part of wider civil justice reforms</td>
<td>Ministry of Justice</td>
</tr>
<tr>
<td>April</td>
<td>Review of voluntary display of food hygiene ratings by food businesses covered by the national Food Hygiene Rating Scheme</td>
<td>Food Standards Agency</td>
</tr>
</tbody>
</table>