

HIGHWAYS AGENCY HEALTH AND SAFETY BEHAVIOURAL STANDARDS

These standards should be regarded as interdependent i.e. achievement on one set is enhanced by attainment on others

Standard: Health and Safety Management System

The standard to be attained is: The organisation has an effective health and safety management system in place to ensure the correct environment to support healthy and safe behaviour.

Unacceptable practice: The overall approach to managing health and safety is inadequate for the organisation's needs.

	Minimum expected	Acceptable	Good
Commitment	There is a developing safety culture. Directors/senior management demonstrate commitment to ensuring the essentials of a health and safety management system is in place and act promptly to respond to health and safety concerns.	There is an improving safety culture. Directors/senior managers consistently demonstrate a passion and commitment to ensuring the essentials of a health and safety management system is in place. They work hard to make their leadership visible on health and safety.	There is a mature safety culture. Directors/senior managers communicate and proactively demonstrate an ongoing commitment to ensuring all aspects of health and safety performance. This encompasses attitudes and values as well as the health and safety management system.
Worker Engagement	In line with duty to consult regulations all workers are consulted regarding changes made to the safety management system.	All workers are consulted when changes are required to ensure the safety management system meets the organisation's needs.	All workers are proactively involved (e.g. via safety representatives) in ensuring the safety management system is updated to exceed the organisations needs.
Prioritisation of health and safety	All health and safety risks are taken seriously. The organisation complies with legislation.	Health and safety is seen as having equal priority with productivity for moral, economic and legal reasons.	Health and safety is the priority and seen as a core company value. Everyone believes that health and safety comes first.
Planning and organising	A formal health and safety management system is used (e.g. health and safety policy and procedures are documented, communicated, applied, monitored and enforced).	The health and safety management system applied is based on 'plan', 'do', 'check', and 'act' principles. Health and safety roles and responsibilities are well defined and include operations personnel at all levels, from boardroom to site.	The health and safety management system applied is based on a relevant published standard that encompasses 'plan', 'do', 'check', and 'act' principles (e.g. HSG 65, OHSAS 18001). The organisation has a long-term action plan in place.
Measurement	Basic measures are in place to monitor health and safety management performance (e.g. number and type of accident/incidents).	Measures are in place to monitor a wider array of indicators of health and safety management performance but are still based primarily on reactive indicators.	Robust (e.g. reliable and valid) monitoring arrangements are in place using both reactive and proactive indicators. Health and safety performance measurement is linked to business performance.
Organisational learning	The organisation updates the safety management system periodically on an ad hoc basis, and on a reactive basis dependent on related incidents/accidents/near misses.	The organisation updates the safety management system regularly (e.g. 3 monthly) and on a reactive basis dependent on related incidents/accidents/near misses, which are investigated thoroughly in order to improve health and safety risk management.	The organisation proactively updates the safety management system in line with developments in good practice, incidents and supply chain engagement. Learning is passed on; the overall approach to managing health and safety extends to all contractors/suppliers.

Standard: Root Cause Identification.

The standard to be attained is: The organisation does not solely focus upon the immediate causes of behaviour. The root causes of incidents/accidents/near misses are identified and solutions developed to control these.

Unacceptable practice: No, or ineffective mechanisms are in place to identify and learn from the root causes of behaviour.

	Minimum expected	Acceptable	Good
Commitment	Following an accident/incident directors/managers are committed to ensuring that root causes are identified and managed.	Directors/managers recognise that accidents are caused by a variety of factors (e.g. safety culture, management decisions). They are committed to proactively identifying and managing root causes before an incident occurs.	Everyone fully understands that root causes are due to a variety of factors and are committed to proactively identifying and managing root causes.
Worker Engagement	Workers are consulted regarding the results of root cause analyses and any changes made as a result.	Workers are consulted when carrying out root cause analyses and developing solutions. Senior managers/directors recognise that everyone can make mistakes and plan work so that conditions on site reduce the chance that they will happen.	Workers are proactively involved in root cause analyses of safe and unsafe behaviours and in the development of practical and workable solutions where relevant.
Prioritisation of health and safety	Controlling health and safety risks at source is a priority. Directors/ managers try to eliminate the risk if possible. If this is not possible, they find a safer way of working or put preventative measures in place to control the risk. PPE is only relied on as a last resort.	In addition to controlling risks at source directors/managers devote considerable effort to encouraging the reporting of unsafe acts/conditions and near misses and feedback promptly on actions taken.	Directors/managers understand there are links between worker morale and wellbeing, productivity and health and safety performance. They consider the impact of all their decisions on these and seek to optimise all three.
Planning and organising	Jobs/tasks are planned in advance by managers/supervisors to ensure that the root causes of potential accidents/incidents are controlled.	Jobs/tasks are planned in advance through consultation with workers to ensure that the root causes of potential accidents/incidents are controlled. Root causes are considered at the design stage e.g. setting up site, designing safe routes.	Workers are proactively involved (e.g. via safety representatives) in planning and organising (e.g. developing risk assessments/method statements and safe systems of work).
Measurement	Simple root cause analysis techniques such as the 5 'Whys' are employed. Near miss reports are collated and the results fed back to everyone.	More complex root cause analysis techniques such as ABC analysis are performed. A thorough analysis of near miss reports and worker engagement feedback is conducted in order to improve site health and safety performance.	The competence of root cause investigation and those conducting it is always considered and assessed.
Organisational learning	Improvements to health and safety management systems are made based upon the identification of root causes following an accident/incident/near miss.	Health and safety improvements are consistently reviewed based upon near miss reporting and an understanding of root causes.	Continual efforts are made to improve health and safety. Root cause analysis is conducted upon safe behaviours. Learning from good practice is passed on within the organisation and to the supply chain. Principals support lower tiers to conduct root cause analysis.

Standard: Leadership Behaviour.

The standard to be attained is: Good leadership is in place encouraging a supportive environment that permits and promotes safe behaviour.

Unacceptable practice: Leaders (Directors, Managers, Supervisors) are not committed to health and safety and fail to be appropriate role models for others. The environment is not supportive and a blame culture exists.

	Minimum expected	Acceptable	Good
Commitment	Leaders are committed to health and safety in order to comply with legislation. Leadership is principally from directors and senior managers.	Leaders are genuinely committed to health and safety for legal, moral and business reasons. They demonstrate this by taking action to improve health and safety and leading by example.	Leaders consistently demonstrate a visible ongoing commitment to all aspects of health and safety performance e.g. regularly attending safety events, safety training. Supervisors are clear role models and drive team standards.
Worker Engagement	Leaders communicate their expectations to workers. They will often recognise and reward good performance in addition to reprimanding unsafe behaviour.	Leaders give workers prompt, honest feedback on their performance praising them for safe behaviours and clearly explaining why they should stop any unsafe behaviour observed. Two-way communication is encouraged.	Everyone is inspired and empowered by good leadership to make and act upon decisions on how to improve their health and safety at work. Workers are confident communicators, regularly giving feedback on health and safety issues to peers/leaders.
Prioritisation of health and safety	Leaders recognise health and safety as important. Legislation is always complied with.	Health and safety has equal status with productivity. Leaders are quick to respond to health and safety concerns. Supervisors know how important it is not to cut corners with health and safety, even on lower risk tasks. Everyone is empowered to stop work in situations they perceive unsafe without fear of recrimination.	Leaders believe and emphasise that health and safety is priority when making decisions. They demonstrate care and commitment and are quick to anticipate health and safety concerns. Supervisors ensure safety standards are understood, implemented and maintained by their team and contractors.
Planning and organising	Leaders take time to plan work, assess risks and explain methods to their workers.	Leaders take time to improve health and safety by organising schedules so that everyone has the time to do the job safely and the necessary resources to work in a healthy and safe way.	Leaders continually strive to identify ways to make the organisation safer and improve the working environment. The impact that all operational and managerial decisions have on health and safety is systematically taken into account when planning. Decisions made are transparent.
Measurement	Leaders performance is measured against health and safety performance e.g. accident/incident numbers and near miss reporting.	Health and safety performance objectives are set for all leaders e.g. monthly site walkabouts by directors/managers, number of safety observations by supervisors. Performance results are feedback throughout the organisation.	In addition to performance targets and feedback, observation and feedback principles are applied to leadership behaviour. Leadership behaviour is regularly monitored e.g. safety climate tool, 360 assessments.
Organisational learning	Managers/supervisors regularly consider their performance and look for ways to improve their leadership skills.	Leaders frequently review their performance and look for ways to improve their leadership skills. Training in leadership skills (e.g. communication is received). Leaders take responsibility for failings and ensure that lessons learned are openly communicated.	Training in leadership skills is provided. Leaders consistently seek advice from others (e.g. workers, peers, other organisations) and consider best practice within the supply chain to identify how they can improve. Good practice is communicated and passed on.

Standard: Delivering Safe Behaviour.

The standard to be attained is: The organisation motivates and empowers everyone (managers, supervisors, workers and contractors) to behave in a safe and healthy manner.

Unacceptable practice: The organisation fails to provide the necessary knowledge, skill and support to enable everyone to behave in a safe and healthy manner.

	Minimum expected	Acceptable	Good
Knowledge	Everyone is equipped with knowledge about the relevant risks, consequences, and controls for their job. Information is given to raise awareness of personal susceptibility to risk.	Everyone is equipped with relevant knowledge for their job and are aware of their personal susceptibility to risk. Methods to provide knowledge e.g. toolbox talks and safety briefings are as engaging and interactive as possible to ensure a positive impact on behaviour.	Gaps in knowledge are identified. A broad mix of persuasive risk communication methods tailored to specific sites / job / task is employed. Everyone is motivated by being given clear, achievable and realistic health and safety goals to work toward. This includes individual and team goals.
Communication	Policies and procedures for essential health and safety activities are communicated clearly to everyone. This includes any changes that occur.	Communication is open, informative and appropriate to site / job / task. A broad mix of formal and informal communication methods are employed. Positive consequences of safe behaviour are communicated. Everyone knows what is expected of them when it comes to health and safety.	Communication is two-way, user centred and credible. Everyone is encouraged and knows how to raise concerns and suggestions to inform decisions about health and safety. Active listening and prompt, honest feedback ensures that everyone is enabled to communicate.
Skill	Everyone is given a good quality formal health and safety induction and the necessary training to equip them with the skills to do their job safely.	Inductions are short, clear and site specific. In addition to job specific skills workers are given training in general health and safety skills (e.g. communication, assertiveness and situational awareness).	Competency and training needs are regularly assessed. Gaps and areas for further training and development are identified. Selection processes ensure that the correct people are in the job.
Support	Systems are in place to ensure a safe working environment for everyone, including sub contractors and clients. Adequate safety resources and training are available. Manager and peer support is encouraged. Basic welfare facilities are provided on site.	Time and priority is allocated to safety initiatives so that everyone can participate. Managers support, and involve everyone to improve health and safety. High welfare and health standards are provided on site.	Everyone receives support and coaching. They are encouraged to be responsible for their own and their colleagues health and safety, by giving them time and resources to contribute to and make health and safety decisions. Welfare and health standards provided on site are of exceptional standard.
Maintenance	Performance is maintained by encouraging workers to report hazards, near misses and incidents, and giving feedback. Good practice is recognised and rewarded and poor practice dealt with firmly and fairly.	Performance is maintained via reporting, and feedback. Training and safety communication is regularly refreshed and repeated for everyone. High standards are maintained through the life of a project (even if deadlines are overrun and the project is late).	Safe behaviours are maintained by regular assessment (e.g. weekly site walkabouts) and observations, to determine if goals are being achieved, and what needs to be reinforced. Feedback is immediate, regular and specific. Formal learning mechanisms are used internally and within the supply chain.