



CorporatePlan

2011-2015

hseⁿⁱ
CONTROLLING RISK TOGETHER



Health and Safety Executive for Northern Ireland

Corporate Plan 2011-2015

© Crown Copyright 2011

You may re-use this document/publication (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit <http://www.nationalarchives.gov.uk/doc/open-government-licence> or write to the Information Policy Team, The National Archives, Kew, Richmond, Surrey TW9 4DU; or email: psi@nationalarchives.gsi.gov.uk

This document/publication is also available on our website at <http://www.hseni.gov.uk>

Any enquiries regarding this document/publication should be sent to us at:
Health and Safety Executive for Northern Ireland, 83 Ladas Drive,
Belfast, BT6 9FR, Northern Ireland; email: mail@hseni.gov.uk

Contents

Introduction	1
Values	3
Vision	4
Governance	6
Strategic Context	7
Focus	11
Targets	18
Annex 1: Operating Principles	24
Annex 2: Review of the period 2008-2011	28
Annex 3: HSENI – The Organisation	30
Annex 4: HSENI Organisation Chart	33





Introduction

We are pleased to present the Health and Safety Executive for Northern Ireland's (HSENI) fifth Corporate Plan for the period 1 April 2011 to 31 March 2015.

The plan derives directly from Northern Ireland's long-term and shared health and safety at work strategy – *“Health and safety at work: protecting lives, not stopping them.”*

The plan very much aligns with the key priority of the Northern Ireland Executive's Programme for Government to grow the economy in that its impact will be to reduce the multi-million pound burden on the local economy brought about by health and safety at work failures.

It has also been cast to accommodate the pressures on public finances that will be faced over the lifetime of the plan.

In moving forward, we do so against a background of robust corporate governance, transparency and accountability underpinned by strong employee engagement.

We are also fortunate in having a well developed and productive partnership with the District Councils with whom we share responsibility for the enforcement of health and safety at work legislation.

Accordingly, we believe that HSENI is in good shape to respond positively to both the opportunities and challenges that lie ahead.

We will continue to stand by our three key tenets of:

- working with small businesses, without the threat of enforcement, to help them gain a foothold in the management of health and safety at work;
- identifying and recognising those businesses and organisations who already manage health and safety to the highest level and, through this recognition, encourage others to emulate them; and
- rooting out and bringing to justice those who flout the law and put the lives and health of workers and the general public at risk.

The plan sets out how we will meet the ten goals set out in our shared long-term strategy. The many and varied programmes and initiatives that will meet these goals include:

- delivering bespoke awareness raising events at the local level across Northern Ireland;
- working closely with District Council colleagues to ensure cost savings in service delivery;
- maximising the benefits of using IT based communication channels to provide clear and easily accessible information and advice;
- undertaking a focussed and measured inspection campaign that will see 24,000 inspections across all work sectors; and
- reducing the burden on businesses by, wherever possible, thinning down the legislative framework.





We fervently believe that this plan represents a balanced approach that puts great store in:

- helping small businesses, particularly start ups, gain the confidence to manage their own health and safety without the need to resort to costly and often unnecessary outside assistance;
- seeking business partners who by their leadership have shown themselves to be excellent in their management of health and safety and thereby enjoy an improved bottom line; and
- focussing on poor and unacceptable behaviour, concentrating our inspection efforts where it is most needed, thereby positively impacting on the health and safety of those most affected whilst lessening the bureaucratic burden on those businesses that make an effort.

In moving this plan forward, HSENI will not operate in isolation. It will continue to develop and enhance its partnership with the District Councils

as well as maintain key linkages with other regulators, particularly HSE in Great Britain and HSA in the Republic of Ireland.

In conclusion, we not only commend this plan to you but also confirm the commitment of the Board and our hard working and dedicated staff to delivering the targets in an efficient, professional, even handed and measured fashion where our only aim is to prevent illness, injury or death in the workplace.

HSENI Chairman

HSENI Chief Executive

Values

HSENI operates against the backdrop of a set of agreed and shared values that spell out how the organisation regards and treats its staff. The values impose both collective and individual responsibilities and are aimed at creating a workplace that fosters the worth of the individual and the wellbeing of all.

- We value people as our most important resource.
- We are committed to ensuring exemplary standards of health and safety for everyone.
- We are committed to equal opportunity, openness, respect for individual differences and a workplace free from harassment.
- We foster an environment that encourages personal development allowing everyone to reach his or her full potential.
- We believe in a team approach to work, with everyone feeling involved, valued and supported.
- We value commitment, motivation, enthusiasm, innovation and creativity.
- We strive for professionalism, quality and excellence in all that we do.





Vision

This plan derives directly from the long-term strategy for the better regulation of health and safety at work in Northern Ireland, conceived and developed in partnership with HSENI's co-regulators the Northern Ireland District Councils.

The development of the strategy was led by the HSENI Board. The strategy took shape and was refined following scrutiny by the Enterprise Trade and Investment Committee of the Northern Ireland Assembly and following a period of public consultation.

The strategy spells out the shared vision, mission and goals that both HSENI and the District Councils will abide by as each delivers its services and meets its targets in their respective enforcement environments.

Accordingly, the shared vision set for the better regulation of health and safety at work in Northern Ireland is:

A place where the sensible control of work-related risk is the norm and work-related deaths, injuries and ill health are the exception.

The essence of the work that we will undertake in pursuit of this broad vision is encapsulated in the following shared mission statement:

To significantly reduce the number of work-related fatalities, injuries and cases of ill health in Northern Ireland.

This mission will be achieved by:

- ensuring that Northern Ireland's health and safety at work regulatory system operates as effectively as possible, supporting businesses and reducing regulatory burdens;
- focusing on the core aspects of workplace health and safety in Northern Ireland, thereby promoting sensible and proportionate risk management by all; and
- targeting District Council and HSENI's resources when appropriate, in a manner that maximises each organisation's ability to prevent harm and secure justice.

Under the strategy, our goals are to:

Goal 1 Working together

Work together to maximise resources to best effect, via joint strategic planning and a collaborative approach to implementation;

Goal 2 Sensible risk management

Promote an approach to workplace health and safety management that informs risk makers and managers about the core principles and real health and safety issues;

Goal 3 Focus on key workplace health issues

Focus on key health issues in the workplace that will bring about a reduction in the number of cases of work-related ill health;

Goal 4 Building capacity

Build capacity for businesses, and in particular SMEs, to effectively manage workplace health and safety;

Goal 5 Vulnerable groups

Assist in highlighting the needs of vulnerable groups to ensure that their needs are recognised and managed within the workplace;

Goal 6 Targeted intervention and enforcement

Target resources for compliance based on proportionate intervention and enforcement;

Goal 7 Working with other regulators

Work with other health and safety regulators in the Republic of Ireland, Great Britain, Europe and other parts of the world, to ensure an effective network for learning and sharing of good practice on key aspects of workplace health and safety;

Goal 8 The wider perspective

Have a wider perspective on other issues and policies that impact on health and safety in the workplace to influence and maximise the benefit from potential synergies;

Goal 9 Leadership

Provide leadership for the regulation of health and safety at work; and

Goal 10 The role of others

Clarify and promote the role of others and their responsibility for managing health and safety and achieving excellence.

HSENI's contribution to delivering these 10 goals will be through its five key objectives:

- **To provide the highest standards of service delivery at the regional level.**
- **To promote key workplace health and safety messages and themes to targeted sectors and groups.**
- **To communicate appropriate, timely and practical workplace health and safety information and advice.**
- **To improve compliance with health and safety standards through inspection and investigation activities.**
- **To ensure that an effective and up-to-date health and safety at work regulatory framework is maintained.**



Governance

Robust corporate governance lies at the heart of how HSENI operates. Taking its lead from the HSENI Board it strives to uphold the highest standards in regard to risk management and internal control.

HSENI, as a public body, regards its stewardship of the funds it is allocated as a very important dimension of its corporate governance. The discharge of this responsibility will be even more crucial as HSENI, through fiscal rectitude, faces the outcome of the understandable pressure on public finances.

What defines this plan is the inherent flexibility built into it to allow HSENI to be responsive to maintaining core front line services when faced with the prospect of having to carry through deep reaching efficiency savings.

HSENI will maintain its risk-based approach to inspection as advocated by the Hampton Review and focus attention both on acute issues such as fatal and other major incidents and on chronic issues such as large volumes of sickness absence due to work-related causes such as stress. HSENI will also be alert to those low probability events with high consequence outcomes such as outbreaks of legionnaire's disease and E.coli 0157 infections.

Fundamentally, HSENI will inspect what needs to be inspected, determined largely by the level of risk posed. It will strongly advocate a sensible approach to risk management in the realisation that a risk free society is both an unattainable and unrealistic demand.

It will continue to assiduously respond to all complaints about unsafe and unhealthy workplaces and investigate serious workplace incidents with a view to criminal prosecution.

Balancing this will be a continuation of its work to assist small businesses and recognise excellence in the management of health and safety. In all of this it will be mindful of seeking value for money.

In setting performance measures and targets, HSENI will analyse all reliable data drawn from the region and further afield. HSENI will also consider the views of its stakeholders as it develops and shapes future policy measures. It will also listen to its customers to ensure that its services are both relevant and focused. It will remain open to new challenges and, resources permitting, will develop an appropriate and affordable service delivery response.

Finally, HSENI will also devote time and effort to meet the statutory obligations required by Equality, Disability Discrimination and Freedom of Information legislation as set out in a range of associated plans, schemes, principles and guidelines. (See Annex 1)

Strategic Context

HSENI is a Non Departmental Public Body with Crown Status. It operates under the terms of a Management Statement and Financial Memorandum at arms length from its sponsor Department, the Department of Enterprise, Trade and Investment.

Furthermore, HSENI works closely with the District Councils with whom it co-enforces health and safety at work legislation.

Much of what HSENI hopes to take forward during the lifetime of this plan will inevitably be shaped and influenced by a range of economic, political and strategic developments. Many of these will be outside of HSENI's direct control but may, nevertheless, have the potential to impact to a greater or lesser extent on the way in which HSENI delivers its services. Chief amongst these will be the current economic deficit and the way in which future public expenditure impacts on the resources available to HSENI and others. This plan will therefore have to be sufficiently flexible to take account of the future environment in which we are forced to operate. It may well be that some of the actions planned may have to be modified depending on whether circumstances change significantly in the future.

HSENI will also need to be mindful of the report by Lord Young of Graffham into Great Britain's health and safety system, Common Sense Common Safety, published in October 2010. Northern Ireland has traditionally maintained close parity with health and safety legislation in Great Britain

(GB) and it is likely that changes brought about in GB will be replicated here, if appropriate to do so. This will obviously be subject to the view of the Northern Ireland Assembly.

HSENI will take its primary strategic lead from the joint long-term strategy for health and safety at work, "*Health and safety at work: protecting lives, not stopping them*"¹, developed between HSENI and the District Councils. The strategy represents a highly significant development in the joint commitment between HSENI and the District Councils that will drive the partnership forward through the next decade and beyond. It establishes a very clear framework for future joint planning, sharing of resources and expertise and, in a real sense, provides a truly Northern Ireland wide, co-ordinated approach to the regulation of health and safety at work.

This Corporate Plan has therefore been developed to underpin the long-term strategy and to set out how progress towards the goals of the strategy will be made over the next four years.


The actions set out in this Plan have therefore all been developed to contribute towards one or more of the ten strategic goals.

Health and Safety Strategy for Northern Ireland

The purpose behind the Health and Safety Strategy for Northern Ireland is to achieve a safer and healthier working environment for everyone in Northern Ireland in a cost effective,

¹ Health and safety at work: protecting lives, not stopping them. A HSENI and District Council Strategy for the better regulation of health and safety at work in Northern Ireland; February 2011. http://www.hseni.gov.uk/joint_strategy.pdf





customer focused and holistic way. HSENI and the District Councils are committed to directing our energies and resources to the achievement of the ten strategic goals outlined in the strategy. A summary of the ten goals of the strategy are outlined below.

Goal 1 Working together

HSENI and the District Councils will work together to ensure the most efficient use of collective resources and in doing so ensure that those responsible manage their workplaces in a way that protects workers and others affected by work activities. The challenge is for HSENI and the District Councils to work together to create a flexible, proactive and responsive regulatory system that can deal effectively with current and future health and safety challenges. HSENI and the District Councils will recognise and make use of their collective expertise to protect lives and promote a culture of efficiency and value for money within the health and safety regulatory system. This will involve joint planning, developing a common competency framework, the sharing of technical support services and joint training for inspectors.

Goal 2 Sensible risk management

Health and safety management has often been misused and misunderstood. There is a need to refocus efforts to make sure that those who create risks properly understand and control them. The development of health and safety competence within workplaces of all sizes is critical to establishing a culture within organisations that is focused on controlling risk. Effective health and safety management involves a

balance between risk and cost and this is incorporated into Northern Ireland health and safety legislation by the concept of the phrase “so far as is reasonably practicable”. HSENI and the District Councils will continue to promote the message that sensible risk management will help to protect business profits as well as being a fundamental cornerstone of a civilised society.

Goal 3 Focus on key workplace health issues

Strategically and operationally, HSENI and the District Councils will primarily address “the prevention of ill health caused by or made worse by work”. We will therefore adopt an approach to workplace health issues which focuses on targeting specific occupational diseases where there is a clear link to occupational exposure and the disease is likely to result in death or long-term life-limiting disability, or where there is high prevalence and simple cost effective measures to eliminate or reduce the risk. We recognise, therefore, that to holistically address some aspects of work-related ill health, we will need to work with partners in the wider workplace health community such as occupational health professionals including those involved in occupational rehabilitation and health promotion. We will focus this work on areas where it clearly contributes to preventing ill health caused by or made worse by work.

Goal 4 Building capacity

We will continue to channel a significant proportion of our resources towards informing and advising businesses of what is expected of them and what they need to do to comply with the legislation through conferences,

seminars, workshops and publications (both hard copy and web based). In addition, where it does not leave workers and others exposed to unacceptable risk, our Inspectors will ensure that their initial engagement with businesses is aimed at achieving compliance by providing help and encouragement, rather than by enforcement.

It is important that all small businesses are aware of and able to avail of the free and confidential advice and support services aimed at helping them manage workplace health and safety. To maximise both coverage and impact, it is crucial that we continue to liaise effectively with intermediaries already working with the small business sector and exploit new opportunities as they arise. We also need to explore ways of ensuring that businesses understand their own specific health and safety needs and when and who to turn to for competent help and advice.

Goal 5 Vulnerable groups

Vulnerable worker(s) is a term which can be used to describe an individual or a group of workers who may be at an increased health and safety risk in the workplace due to their specific needs. This could be an inability to speak or understand English, having a disability, being a younger, an inexperienced or older worker, an agency or temporary worker, or for a gender based reason such as pregnancy.

HSENI and the District Councils will, as regulators, promote and enforce the legal requirement for employers to recognise and effectively manage

any specific health and safety needs of vulnerable individuals and groups. In addition to this, and utilising other specialist input if required, we will ensure that the recognition of vulnerable workers' needs will form an intrinsic part of intervention strategies aimed at achieving wider compliance with workplace health and safety laws.

Goal 6 Targeted intervention and enforcement

HSENI and the District Councils are committed to working to the better regulation principles advocated by both Hampton² and Macrory³. By doing so, we will continue to target resources at work situations that pose the highest risk. We will also continue to use improvement and prohibition notices effectively, and will keep abreast with relevant developments on better regulation. Where appropriate, we will also continue to robustly recommend prosecution for serious breaches of health and safety standards, particularly where malpractice significantly threatens the lives or wellbeing of people.

We will also ensure that the collective inspection resources available to HSENI and the District Councils are used wherever possible to best effect. This will involve much closer collaboration during intervention initiatives and enforcement campaigns to ensure optimal use of resources.

Goal 7 Working with other regulators

In Northern Ireland, health and safety at work, like most regulatory functions,

² Reducing Administrative Burdens: Effective inspection and enforcement, HM Treasury, March 2005
<http://www.hm-treasury.gov.uk/media/7/F/bud05hamptonv1.pdf>

³ Regulatory Justice: Making Sanctions Effective, Better Regulation Executive, November 2006
http://bre.berr.gov.uk/regulation/documents/pdf/macrory_penalties.pdf





does not exist in isolation. It both feeds into and is influenced by developments in other jurisdictions, specifically the Republic of Ireland (RoI), Great Britain and the wider European Union.

We therefore need to continue to maintain and build relationships with our equivalent statutory bodies in these jurisdictions to ensure that we benefit from lessons learned and good practices developed elsewhere.

Goal 8 The wider perspective

We will build on the strengths of the HSENI and District Council partnership, which include a better understanding of the value of local versus central interventions, joint planning, joint decision making and joint action to influence other agencies and government departments. This will ensure that workplace health and safety features meaningfully in both regional and local priorities and strategies for improving the health, work and wellbeing of both the working population and local communities.

Goal 9 Leadership

HSENI and the District Councils will lead by encouraging organisations such as insurers, the legal profession, standard setters, consultants, professional bodies and the media to use their influence to reduce the unhelpful influence of 'risk mongers' (those who inflate the perception of risk, often for their own benefit) and the proliferation of contrary messages distorting perceptions of risk and its complexity.

HSENI and the District Councils will also encourage leadership within the workplace, ensuring that businesses and the public sector organisations take ownership of risk and accept responsibility for managing it.

Goal 10 The role of others

The strong co-regulator partnership between HSENI and the District Councils is integral to this strategy and its successful delivery – but the regulators cannot do it alone. We need everyone to play their part in delivering improved standards of performance in health and safety because, ultimately, it is the delivery of this strategy that will count.

Employers, in particular the senior management, play an influential role in raising health and safety capabilities within individual companies, whilst workers are often the ones who are most exposed to workplace risks and their active participation in health and safety matters in the workplace is therefore critical. Representative organisations such as employer organisations, trade associations and trade unions, along with education centres and voluntary organisations, are also in a position to play a key role in driving forward health and safety improvements.

We will therefore continue to work with other key players, wherever appropriate and worthwhile, to ensure that their respective roles and responsibilities are clearly understood.

Focus

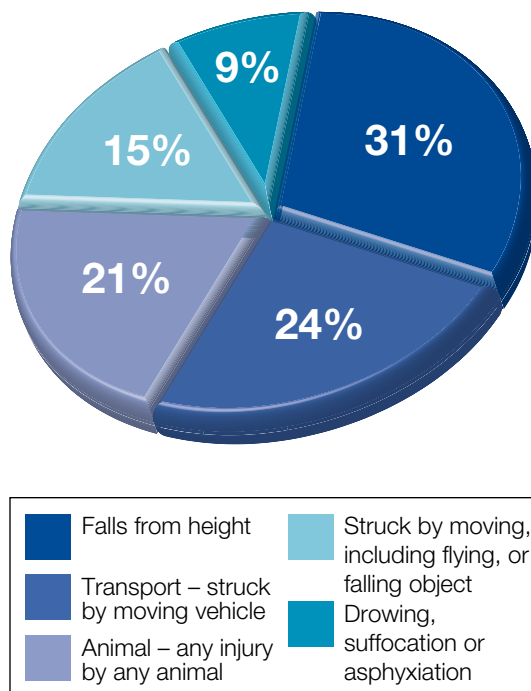
Introduction

In order to focus HSENI's inspection, investigation, promotional and advice giving activities, to ensure the biggest impact as well as value for money, an analysis of a range of data sources was carried out to identify the main causes of injury and ill health in the workplace in Northern Ireland. The key data set utilised was that provided by the incident reports made under the Reporting of Incidents, Diseases and Dangerous Occurrence Regulations NI 1997 (RIDDOR)⁴ between 2007 and 2010. Other key sources of data include the Northern Ireland Labour Force Survey⁵, the General Register Office for Northern Ireland⁶ death certificates and research carried out by HSE (GB)⁷.

Fatal Injury Causation

Between April 2007 and March 2010, there have been 41 work-related fatalities in Northern Ireland. The top three causes have been falls from height (31%), struck by a moving vehicle within the workplaces (24%) and handling livestock (21%) (see Fig 1).

Fig 1



The majority of falls from height occur during construction and building maintenance activities, while transport-related incidents, which includes people being crushed or run over, can occur in almost any sector. The agriculture sector accounts for all of the livestock related deaths with bulls featuring in the majority of incidents.

⁴ Employers have legal duties under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997 (RIDDOR (NI)) to report some types of work-related injuries and ill health including fatalities, major injuries and incidents resulting in employees being off work for more than three days.

⁵ The NI Labour Force Survey (LFS) is carried out by the Central Survey Unit (CSU) of the Northern Ireland Research and Statistics Agency (NISRA) on behalf of the Department of Enterprise, Trade and Investment (DETI). The NI LFS is closely related to the GB LFS. It is a quarterly sample survey of households living at private addresses.

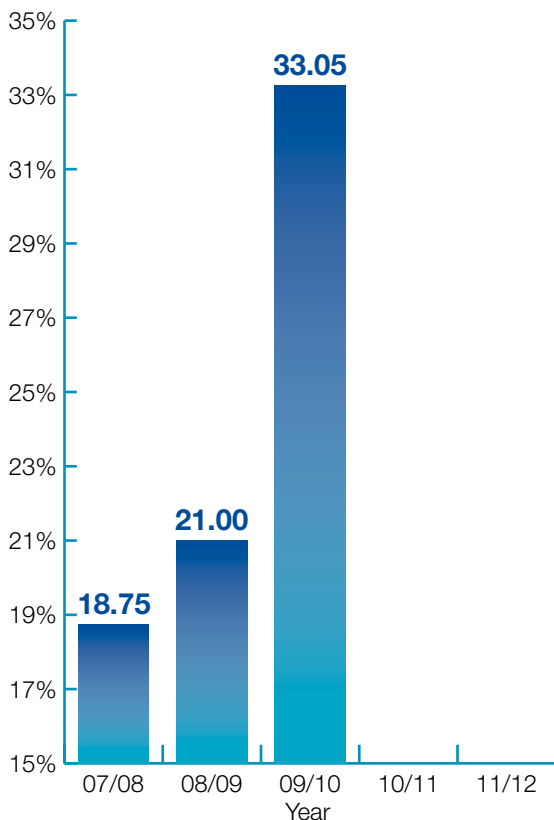
⁶ Regular statistical outputs based on The General Register Office registrations of deaths are published by the Demography section of the Northern Ireland Statistics & Research Agency (NISRA).

⁷ HSE(GB) Statistics Branch provide statistical and epidemiological data and advice on ill health and injuries through surveys eg. the Labour Force Survey and Workplace Health and Safety surveys, RIDDOR injury statistics and ill health surveillance schemes.



Additional analysis of the data for the past 10 years indicates an increasing proportion of fatal incidents occurring during maintenance activities (see Fig 2).

Fig 2: Percentage of fatal incidents related to maintenance

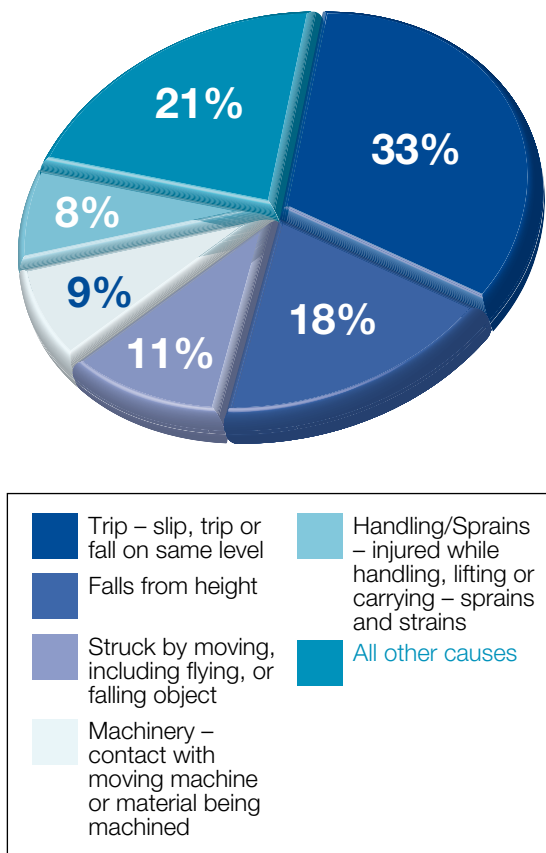


Often maintenance activities are 'one off' events which are reactive and unplanned. Generally, they involve risks not regularly encountered during normal operations. They are also commonly carried out under significant time pressures and outside the working day. In many of these cases high speed machinery is involved with guarding either removed or disabled to enable access.

Major Injury Causation

The number of major injuries reported to HSENI (as defined by the RIDDOR Regulations) and which includes a wide range of trauma, eg. fractures, amputations, loss of an eye, unconsciousness as a result of exposure to electricity or harmful substances etc., over the period April 2007 to March 2010 was 1,150.

Fig 3: Major Injury Causation



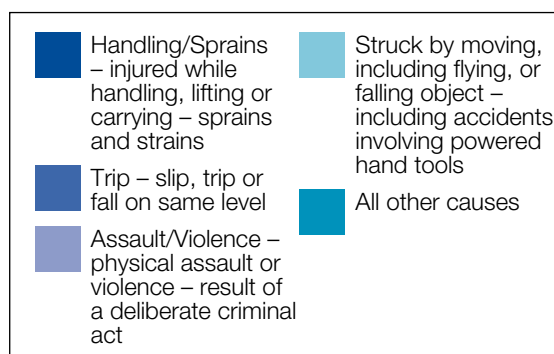
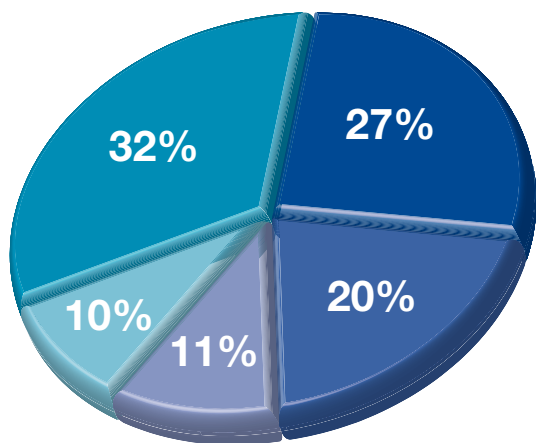
The majority of these incidents result from slips and trips (33%) and falls (18%). Other causal factors include being struck by falling or flying objects (11%), contact with moving machinery (9%) and injuries as a result of lifting and handling (8%) (see Fig 3).



Over-3-Day Injury Causation

An over-3-day injury is one which lacks the severity to be classed a “major” but does result in the injured person being away from work, or unable to do their full range of normal duties for more than three days. Whilst these are described as 3-day incidents, many result in more protracted periods of absence and long-term health effects. In the period April 2007 to March 2010, there were 4,500 such incidents reported to HSENI.

Fig 4: ‘Over-3-Day’ Injury causation



In this category, over a quarter of all incidents were related to sprains and strains associated with handling and lifting (27%), while slips, trips and falls again account for a considerable percentage (20%) (see Fig 4). Incidents related to non-consensual assault and violence predominantly occur in the public sector and are associated with front line activities such as policing and accident and emergency.

Ill Health Causation

Background to the data

There is a paucity of statistics relating to occupational ill health in Northern Ireland. This is due to three main factors, namely constraints on the types of diseases reported, the often long latency periods associated with occupational diseases and the small sample size of locally based surveys.

In the first instance the majority of data collected by systems such as RIDDOR and the Industrial Injury Disablement Benefit systems relate to a limited number of prescribed diseases linked to specific occupations.

The situation is also complicated by the time between exposure to something which causes ill health and the development and diagnosis of the disease, known as latency. This results in many conditions never being reported.

Inevitability in a small region such as Northern Ireland, the small sample size used in surveys is unable to provide any reliable analysis of causation.

As a result of these factors, HSENI must also turn to data sets employed in Great Britain by our counterpart organisation, HSE (GB), and where appropriate further afield.

Work-related ill health fatalities

HSE (GB) has commissioned research to assess up-to-date estimates of the current burden of occupational cancer in Great Britain due to past exposures to carcinogens⁸. Initial findings indicate that up to 4.9% of all cancer deaths may be attributable to occupational exposure. If extrapolated to Northern Ireland, where approximately 4,000 cancer deaths were recorded in 2008, this means that up to 200 occupationally-related cancer deaths may occur here each year.

Asbestos-related cancers make up a substantial proportion of the occupational cancer deaths. Analysis of death certificates in Northern Ireland over the past three years shows in the region of 60 asbestos-related deaths per annum associated with exposure to asbestos (resulting in asbestosis and mesothelioma) (see Table 1).

Registration Year	Primary/secondary cause			
	Mesothelioma without asbestosis	Asbestosis* without mesothelioma	Mesothelioma and asbestosis*	All primary or secondary cause
2007	34	29	2	65
2008	39	13	1	53
2009**	42	21	0	63

Table 1. Deaths caused, or contributed to, by Asbestos-related Diseases (Source GRO)

* For certain years these figures also include a small number of other asbestos-related chest diseases and pulmonary fibrosis where there was coexisting asbestos exposure.

** Figures for 2009 are provisional.

Due to the latency of asbestos-related cancers, the deaths listed above will be as a result of exposure more than 20 years ago, however recent analysis of current management and control of asbestos in buildings highlights the need for continued action.

Other Major Causes

A recent Labour Force Survey⁹ estimated that 19,000 persons suffered from a work-related illness in the year prior to January to March 2010, but due to the sample size a more detailed analysis of causation was not possible. However, the equivalent survey in Great Britain¹⁰ indicates the major causes as set out in Fig 5 opposite.

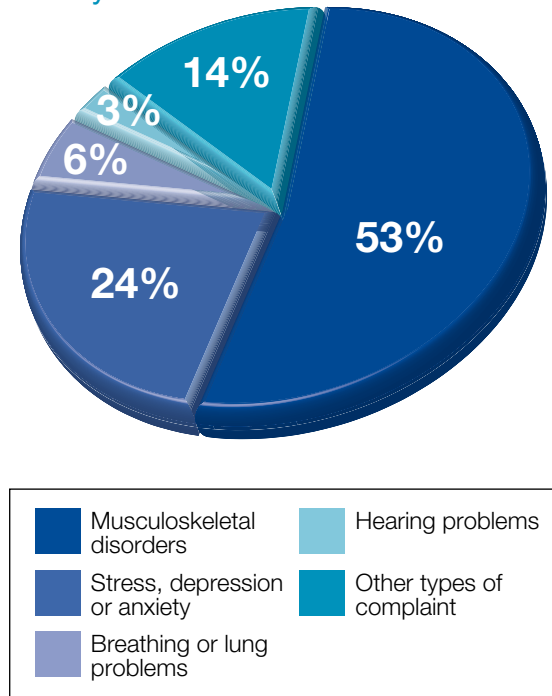
⁸ RR595 - The burden of occupational cancer in Great Britain, HSE Research Report. <http://www.hse.gov.uk/research/rrhtm/rr595.htm>

⁹ Northern Ireland Labour Force Survey: January to March 2010, DETI http://www.detini.gov.uk/january_-_march_2010-5.pdf

¹⁰ Self-reported work-related illness and workplace injuries: Results from the Labour Force Survey (LFS), HSE <http://www.hse.gov.uk/statistics/lfs/index.htm#illness>

Fig 5: Self reported illness caused or made worse by work

HSE Analysis of GB Labour Force Survey



Musculoskeletal disorders are the most prevalent cause making up over 50% of those reported and will include problems such as low back pain, joint injuries and repetitive strain injuries of various sorts. This is in agreement with the high proportion of over-3-day injuries associated with lifting and handling.

Other areas of concern include a range of mental health issues (including stress, depression and anxiety) (24%), breathing and lung problems (including occupational asthma, chronic obstructive pulmonary disease, pneumoconiosis, silicosis and other respiratory diseases) (6%) and noise induced hearing loss (3%).

Low Frequency, High Consequence Events

Focusing purely on trailing indicators such as the above statistics does not of itself identify those events which thankfully occur infrequently but when they do have a high consequence for society as a whole. Examples of these range from events in the petro-chemical industry such as the release of hazardous chemicals or a major fuel oil fire and explosion eg. Buncefield¹¹ (2005) to outbreaks of life threatening illness such as legionnaire's disease or E.coli 0157 infections. In the 2002 Barrow incident,¹² seven members of the public died and 180 people suffered ill health as a result of an outbreak of legionella at a Council - owned arts and leisure facility in Barrow town centre and in 2009, the Godstone animal petting farm incident,¹³ 93 people including 76 children under the age of 10 became infected by E.coli 0157, a potentially fatal organism.

HSENI shall continue to be proactive in holding COMAH (Control of Major Accident Hazards) site management to account for the adequacy of their control measures and shall seek compliance with best practice standards when E.coli 0157 or legionella risks may be present to workers and/or members of the public.

Carbon Monoxide Poisoning

HSENI has also identified carbon monoxide poisoning as a major cause of deaths and illnesses in the general population. Upwards of 62 people have died in the past ten years from carbon monoxide poisoning arising

¹¹ <http://www.buncefieldinvestigation.gov.uk/index.htm>

¹² <http://www.hse.gov.uk/legionnaires/barrow.htm>

¹³ <http://www.griffininvestigation.org.uk/>



Focus



from the burning of a range of fossil fuels. Not all are directly attributable to a work activity such as a boiler installation as it is difficult to make this distinction from the raw data available. Therefore, HSENI has taken the view that raising public awareness of the risk of carbon monoxide poisoning from badly installed or unserviced appliances is a key action to ensure public safety. HSENI is supported in this by the fuel supply companies, government departments, District Councils and voluntary agencies.

Priorities

Given this analysis, HSENI will concentrate its efforts in addressing the actual and potential causes of work-related death, injury and illness. Therefore, HSENI will, over the period of this Plan, focus on the following priorities:

1. Falls from Height

Whilst the majority of deaths resulting from falls from height occur in the construction industry, they do occur in other work sectors also.

2. Transport in the Workplace

Transport-related injuries occur in a wide range of workplaces across the public and private sectors. The risks are particularly high within certain industries such as the waste and recycling industry at landfill sites and during waste collection services.

3. Handling Livestock

The unpredictability of livestock during handling is a well recognised risk that must be carefully assessed and managed on an ongoing basis on the farm.

4. Maintenance Activities

The recent increasing trend of fatal and major injury incidents resulting from unsafe maintenance activities has occurred across a range of work sectors. This trend has been particularly evident in the manufacturing sector and incidents often occur outside normal working hours, when time pressures become a factor and when young or other vulnerable groups become involved in unsafe systems of maintenance work.

5. Manual Handling and Repetitive Work

Musculoskeletal disorders including back injuries are a well recognised risk in almost any sector where lifting, handling or repetitive work is carried out.

6. Exposure to Asbestos Fibres

Asbestos is likely to be found in any building constructed before 2000. Tradesmen undertaking maintenance and refurbishment are at greatest risk. Asbestos removal needs to be undertaken by competent licenced contractors.

7. Slips and Trips

Slips and trips continue to be a leading cause of injuries across all sectors, being particularly prevalent in the education sector.

8. Work-related Stress

Work-related stress that can lead to mental health issues is recognised widely as a cause of ill health in the public sector. It is also recognised in the private sector in areas such as banking and other financial institutions.

9. Major Accident Hazards

Where large inventories of explosive, toxic or flammable substances are stored or used, this presents the risk of a catastrophic incident such as a major fire or explosion or release of a toxic gas cloud.

10. Public Health Incidents

Failure to control the growth or spread of harmful bacteria such as legionella or E.coli 0157 can lead to rapid infection of large numbers of people. Strict adherence to sterilising regimes and high standards of personal hygiene need to be adhered to and monitored.

11. Carbon Monoxide Poisoning Awareness

Ongoing deaths and ill health are caused by exposure to carbon monoxide which can be produced by any fossil fuel burning appliance that is not properly installed or regularly serviced. Here it is not only poor workmanship on the part of heating engineers but also householders and landlords failing to service and maintain appliances that can lead to death and illness.

Each HSENI operational group (see Annex 4) will focus on the priority issues above that are specific and appropriate to the work sectors associated with their group to deliver a range of priority issue initiatives in partnership when appropriate with District Councils over the course of this Corporate Plan.





Targets

The fundamental measure of health and safety performance is whether the number of work-related deaths, injuries and incidences of ill health in Northern Ireland is reducing. Northern Ireland has seen a very significant reduction in the numbers of work-related injuries being reported to the enforcing authorities (ie. HSENI and the District Councils) since HSENI was established in 1999.

In 2010/11, there were 2,975 injuries reported to HSENI and District Councils under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997 (RIDDOR). This represented a 15% reduction in the number of injuries reported over the previous four years since 2006/07, when the number of reported injuries was 3,524¹⁴.

Over the four years of this Corporate Plan, HSENI will work with others in aiming to achieve a further 10% reduction in the number of reportable work-related injuries recorded by the enforcing authorities, based on the 2010/11 figure of 2,975.

This reduction is estimated to equate in monetary terms to a saving to the local economy of up to £14m over the four-year period. Related benefits include fewer workers suffering injury, fewer days lost as a result of work-related injuries and increased health and wellbeing of workers, leading in turn to increased productivity.

However, it must be borne in mind that there are significant factors outside the control of the enforcing authorities that can influence trends in reportable work-related injuries, eg. general economic climate, numbers employed, distribution of employees across industries etc.

HSENI has endeavoured to develop a workplace health target. However, this has proved to be a difficult task given the paucity of data on work-related illness. HSENI will, over the course of this Plan, engage with others in government to develop a meaningful and statistically robust target.

To contribute towards achieving these overarching targets for health and safety in Northern Ireland, HSENI has also developed a number of specific performance targets which align with its five key objectives as set out in the following pages.

¹⁴ Injury figures taken from HSENI Annual Report and Accounts 2010-2011.

Objective: To provide the highest standards of service delivery at the regional level

HSENI's service delivery will be characterised by:

- seeking value for money in all that it does;
- being a clearly recognisable, accessible and authoritative body that instils confidence in the citizen;
- working in close partnership with the District Councils;
- being autonomous – professionally, legally and technically;
- being open and transparent in all that it does;
- being accountable for its actions;
- being consistent and even-handed; and
- being guided by the strategic leadership of its Board.

Where appropriate, HSENI's actions under this objective will contribute to the following strategic goals:

- Goal 1 Working together; and
- Goal 7 Working with other regulators.

Key Performance Targets


During the period of this Plan, HSENI will:

- Meet the targets set out in its Customer Care Charter, notwithstanding any reductions to its budget over the lifetime of this Plan; and
- Implement, as appropriate, the recommendations made by the Northern Ireland Audit Office in its Value for Money Study of HSENI published in 2010¹⁵.



Targets

¹⁵ 'Review of the Health and Safety Executive for Northern Ireland', Report by the Comptroller and Auditor General, 8 September 2010, a full copy of which is available at www.niauditoffice.gov.uk



Objective: To promote key workplace health and safety messages and themes to targeted sectors and groups

Key aspects of HSENI's promotional programme will be to:

- focus on the Priorities;
- focus on the needs of small businesses;
- continue to put health and safety on the business agenda; and
- work in partnership with other key stakeholders where appropriate.

Where appropriate, HSENI's actions under this objective will contribute to the following strategic goals:

- Goal 2 Sensible risk management;
- Goal 3 Focus on key workplace health issues;
- Goal 4 Building capacity;
- Goal 5 Vulnerable groups;
- Goal 8 The wider perspective;
- Goal 9 Leadership; and
- Goal 10 The role of others.

Key Performance Targets

During the period of this Plan, HSENI will:

- run or participate in 600 local promotional events including workshops, seminars, exhibitions, etc., providing attendees with key health and safety messages so that they will through their actions have a positive impact on the standard of health and safety in their businesses, workplaces and communities.

Objective: To communicate appropriate, timely and practical workplace health and safety information and advice

Key aspects of HSENI's approach to communicating information and advice will be to:

- focus on the Priorities;
- focus on the needs of small businesses;
- work in partnership with other key stakeholders where appropriate;
- provide accessible information and advice, making full use of communication and information technologies; and
- use environmentally friendly materials whenever possible.

Where appropriate, HSENI's actions under this objective will contribute to the following strategic goals:

- Goal 2 Sensible risk management;
- Goal 3 Focus on key workplace health issues;
- Goal 4 Building capacity;
- Goal 5 Vulnerable groups;
- Goal 9 Leadership; and
- Goal 10 The role of others.


Key Performance Targets

During the period of this Plan, HSENI will:

- distribute 500,000 items of published information/advisory material (including electronically published materials) to employers, employees and members of the public, to allow them to make informed decisions about their health and safety so that each will, through their actions, have a positive impact on the standard of health and safety in their businesses, workplaces and communities; and
- through its small business advisory service, Health and Safety Works NI (HSWNI), provide mentoring to 1,200 small businesses with the aim of positively impacting on their management of health and safety.



Targets



Objective: To improve compliance with health and safety standards through inspection and investigation activities

Key aspects of HSENI's approach to inspection and investigation will be to:

- focus on the Priorities;
- carry out inspection and investigation activities on a risk-related basis;
- ensure compliance through the provision of information and advice and, where necessary, through enforcement in accordance with HSENI's Enforcement Guidelines; and
- deploy resources in a manner appropriate to the needs and demands of the sector.

Where appropriate, HSENI's actions under this objective will contribute to the following strategic goals:

- Goal 3 Focus on key workplace health issues;
- Goal 4 Building capacity;
- Goal 5 Vulnerable groups;
- Goal 6 Targeted intervention and enforcement; and
- Goal 10 The role of others.

Key Performance Targets

During the period of this Plan, HSENI will:

undertake at least 24,000 inspections across all work sectors for which HSENI is responsible, aimed at improving levels of compliance with health and safety standards; and

- consider for enforcement action in accordance with HSENI's Enforcement Guidelines, all employers found to have an unsatisfactory level of compliance.

Objective: To ensure that an effective and up to date health and safety at work regulatory framework is maintained

In pursuance of this objective, HSENI will:

- ensure that due account is taken of relevant EU Directives;
- ensure that legislative parity with Great Britain, including deregulation activity, is maintained where appropriate; and
- ensure that appropriate and proper consultation is undertaken in relation to HSENI's proposals to introduce new Regulations and Approved Codes of Practice.

Where appropriate, HSENI's actions under this objective will contribute to the following strategic goal:

- Goal 7 Working with other regulators.

Key Performance Target

During the period of this Plan, HSENI will:

- ensure that 100% of its proposals for the making of health and safety regulations required to satisfy EU Directives will be submitted to the Department within six months of the corresponding regulations being made in Great Britain.



Targets



Annex 1: Operating Principles

Human Resources

HSENI is fully committed to the principles of business excellence. Achieving this will be by fully realising the skills and experience of its entire staff as articulated in HSENI's Values. Consequently, HSENI will:

- maintain a high level of employee engagement;
- create an inclusive, safe and healthy working environment for all staff;
- actively promote fairness and equality;
- continue to develop staff to ensure the availability of suitably qualified staff to meet HSENI's objectives;
- continue to develop managers in line with its Management Standard;
- continue its commitment to Investors in People;
- encourage team working within an open and participative management culture; and
- maintain good industrial relations and liaise regularly with Trade Union representatives.

Efficiency and Value for Money

HSENI in ensuring that the public resources allocated to it are used to best effect will:

- regularly monitor performance;
- conduct Internal Audits of its operating systems;

- adopt a strategic approach to risk management;
- keep its performance measurement mechanisms under review;
- seek opportunities to enhance value for money through working in partnership with others;
- evaluate the impact of what we do;
- maintain expenditure within resource limits and to approved budgets, keeping administrative costs to a minimum; and
- recover costs where appropriate.

Quality of Service

In order to support the achievement of its key objectives and targets, HSENI will:

- operate in a consistent and co-ordinated manner in the application of the Service First principles;
- treat all its customers in an open, fair and impartial way;
- put things right if they go wrong and explain how to complain if dissatisfied;
- ensure that suppliers are paid promptly in line with Better Payment Practice;
- have an independent customer satisfaction survey carried out within the lifetime of this Plan; and
- exploit the benefits of information technology in the delivery of its service.

Service First – Key Customer Standards

HSENI will endeavour to operate at all times to its Service First standards as set out in HSENI's Customer Care Charter and which are reproduced below:

- identify ourselves by name on the telephone and in letters;
- field staff will carry identification;
- meet personal callers, with or without an appointment, within five minutes of arrival;
- provide a response to an enquiry within 10 working days;
- treat in confidence information that HSENI receives unless it is required to disclose that information for legal reasons;
- respond to requests for leaflets within five working days; and
- ensure that complaints are dealt with quickly and effectively.

Enforcement Guidelines

HSENI's Enforcement Guidelines draw heavily on the principles contained in the Enforcement Concordat produced by the Cabinet Office in March 1998 and are consistent with Hampton principles and Macrory characteristics.

HSENI will, when enforcing the provisions of the relevant health and safety legislation, abide by the following principles:

- Proportionality – relating enforcement action to the risks;
- Targeting – targeting activities with the most serious risk;

- Consistency – taking a similar approach in similar circumstances to achieve similar ends;
- Transparency – helping dutyholders understand what is expected of them and what they should expect from Inspectors; and
- Accountability – being accountable for its actions and having effective procedures for dealing with comments and handling complaints.

Statutory Responsibilities

Equality

HSENI is fully committed to the fulfilment of Section 75 obligations on the promotion of equality of opportunity between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation, between men and women generally, between persons with disability and persons without and between persons with dependants and persons without. Consideration of these requirements forms part of HSENI's core policy making processes.

HSENI is equally committed to the promotion of good relations between people of different religious, political and racial groups.

HSENI has an *Equality Scheme* in place setting out how HSENI fulfils its statutory equality duties. This Scheme will be aligned with HSENI's Corporate Plan and revised in accordance with the Equality Commission's Section 75 Guide for Public Authorities (published April 2010).





Disability

HSENI is aware of its duty, when carrying out its functions, to have due regard to the need to:

- promote positive attitudes towards disabled people; and
- encourage participation by disabled persons in public life.

With regard to the first duty, HSENI has embedded the need for employers, as part of its joint Strategy with the District Councils for the better regulation of health and safety at work in Northern Ireland, to clearly recognise that risk assessments should address the specific needs of disabled workers to ensure that they are appropriately protected and that worker involvement is an essential element of these risk assessments.

HSENI as a regulator, will utilise its own function to promote and enforce the legal requirement for employers to recognise and effectively manage any specific health and safety needs of vulnerable individuals and groups, including those with a disability.

In accordance with Section 49B of the Disability Discrimination Act 1995 (as amended by the Disability Discrimination (Northern Ireland) Order 2006), HSENI submitted its first *Disability Action Plan* (DAP) to the Equality Commission in June 2007. The Plan outlines the action which HSENI is taking to comply with its statutory disability duties and will be updated on an annual basis as HSENI responds to new situations and initiatives.

Access to Information

HSENI regards the lawful and correct treatment of information as essential to its successful operations and to maintaining confidence between the organisation and those with whom it transacts business and the public in general. The organisation has specific policies in place on Data Protection and Information Security and has appointed an Information Officer who has responsibility for the day to day oversight of data protection issues.

HSENI is committed to being as open and transparent to the public in its operations and decisions as possible and has appointed a Freedom of Information Officer who is responsible for handling requests for information under the Data Protection Act, Freedom of Information Act and Environmental Information Regulations. In addition, HSENI has produced a Publication Scheme that identifies the information that it publishes or intends to make routinely available to the public.

Human Rights

The Human Rights Act 1998 incorporates the rights and freedoms guaranteed under the European Convention on Human Rights into domestic law. As with all public bodies, HSENI must ensure that where its decisions or actions impact on the rights of individuals, those decisions or actions comply with the Convention.

Research

Under its statutory remit, HSENI may commission or sponsor research concerned with securing the health, safety and welfare of persons at work or the control of dangerous substances. In discharging this role, HSENI aims to develop partnerships in relevant research with universities and other institutions. To this end, HSENI maintains close working relationships with the Health and Safety Executive in Great Britain.

HSENI will only support research that derives from and underpins its policy and operational needs. Quality, affordability and value for money will be important considerations before decisions are taken to support new research projects.



Annex 2 : Review of the Period 2008-2011

Information on HSENI's numerical targets and corresponding outputs for the last three years, together with estimated targets for 2011/12, is contained in the table below.

This table also provides estimated outputs against HSENI's numerical Key

Performance Targets contained in its previous Corporate Plan for 2008/11.

More detailed information on HSENI's performance during the last three years is contained in its Annual Reports for the relevant years.

Annual Operating Plan Targets		08/09	09/10	10/11	11/12
Number of targeted promotional events aimed at priority issues and high risk work sectors.	Target	8	8	7	14
	Output	9	8	7	
Number of Health and Safety Awareness Days to be delivered.	Target	3	2	No target set	No target set
	Output	3	2		
Number of small businesses provided with mentoring by HSENI's small business advisory service, Health and Safety Works NI (HSWNI).	Target	200	200	200	300
	Output	235	219	339	
Number of inspections conducted across all work sectors for which HSENI is responsible. ¹⁶	Target	4,000	5,000	4,300	6,000
	Output	4,714	7,029	5,963	
Percentage of reportable fatal incidents investigated.	Target	100%	100%	100%	100%
	Output	100%	100%	100%	
Corporate Plan 2008/2011 Targets				08/11	
Reduction in number of reportable work-related injuries recorded by the enforcing authorities. (compared to baseline of 3,853 injuries in 2005/06).	Target			5%	
	Output			23%	
Number of representatives of companies, employing organisations and trade unions participating in HSENI promotional events.	Target			1,700	
	Output			2,386	
Percentage of companies or employing organisations making improvements to their workplace health and safety standards as a result of participating in HSENI promotional events.	Target			75%	
	Output			78%	


¹⁶ Not including inspections of gas installations.

Corporate Plan 2008/2011 Targets (continued)				08/11	
Percentage of those attending HSENI promotional events who are new delegates.	Target			30%	
	Output			33%	
Number of Health and Safety Awareness Days to be organised and delivered.	Target			9	
	Output			5	
Numbers of items of published information/advisory material distributed to customers, including downloads from HSENI website.	Target			300,000	
	Output			404,000	
Percentage of requests for published information and advice from employers that result in improvements in workplace health and safety standards.	Target			70%	
	Output			75%	
Number of small businesses provided with mentoring by HSENI's small business advisory service, Health and Safety Works NI (HSWNI).	Target			600	
	Output			793	
Number of school leavers entering employment provided with health and safety advice.	Target			8,000	
	Output			9,425	
Number of inspections conducted across all work sectors for which HSENI is responsible. ¹⁷	Target			15,000	
	Output			17,706	
Percentage of employers inspected and found to have an unsatisfactory level of compliance to have demonstrated a satisfactory improvement when re-inspected.	Target			75%	
	Output			91%	
Percentage of employers found to have an unsatisfactory level of compliance when reinspected to be considered for enforcement action.	Target			100%	
	Output			100%	
Number of additional inspections of substandard and unsafe gas installations carried out.	Target			2,000	
	Output			2,357	
Percentage of proposals for health and safety regulations to implement EC Directives submitted to DETI within six months of the corresponding regulations being made in GB.	Target			100%	
	Output			100%	

¹⁷ Not including inspections of gas installations.



Annex 3: HSENI – The Organisation



HSENI, the lead body for health and safety in Northern Ireland, was established on 1 April 1999 as an executive Non Departmental Public Body (NDPB) with Crown status. This was brought about by an Order in Council amending the Health and Safety at Work (Northern Ireland) Order 1978. An executive NDPB has a role in Central Government but is not a Department or part of one. HSENI is funded by the Department of Enterprise, Trade and Investment (DETI).

HSENI's business is to ensure that risks to people's health and safety arising from work activity are properly controlled, in ways that are proportionate to risk, allow for technological progress and pay due regard to costs as well as benefits; and in all that it does, seek to promote better management of health and safety at work, through systematic approaches to identifying hazards and assessing and controlling risks.

HSENI, subject to the DETI Minister, has primary responsibility under the above Order for the regulation of health and safety at work in Northern Ireland. This involves the proposing and setting of necessary standards and securing compliance with those standards and undertaking other forms of activity designed to stimulate or support necessary action on the part of people and organisations that actually create risk.

Board

To oversee its operation and to provide strategic guidance, HSENI has an up to 10 member Board which is appointed in accordance with the guidelines published by the Commissioner for Public Appointments for Northern Ireland.

Board Members

George Lucas – Chairman
Stephanie Lowry – Deputy Chairperson
Brenda Maitland
Jim Collins
Brendan Mackin
Pat Lyons
Crosby Cleland
Lyn Fawcett
Gerard Campbell

The Board has corporate responsibility for ensuring that HSENI fulfils the aims and objectives set by the Department and approved by the Minister, and for promoting the efficient, economic and effective use of staff and other resources by the NDPB. To this end, and in pursuit of its wider corporate responsibilities, the Board shall:

- establish the overall strategic direction of HSENI within the policy and resources framework determined by the Department;
- ensure that the Department is kept informed of any changes which are likely to impact on the strategic direction of HSENI or on the attainability of its targets, and determine the steps needed to deal with such changes;

- ensure that any statutory or administrative requirements for the use of public funds are complied with; that the Board operates within the limits of its statutory authority and any delegated authority agreed with the Department, and in accordance with any other conditions relating to the use of public funds; and that, in reaching decisions, the Board takes into account guidance issued by DFP and the Department;
- ensure that the Board receives and reviews regular financial information concerning the management of HSENI; is informed in a timely manner about any concerns relating to the activities of HSENI; and provides positive assurance to the Department that appropriate action has been taken on such concerns;
- demonstrate and ensure high standards of corporate governance are observed at all times. This shall include using the independent audit committee to help the Board address key financial and other risks facing HSENI; and
- appoint a Chief Executive of HSENI subject to the approval of the Department, and, in consultation with the Department, set performance objectives and remuneration terms linked to these objectives for the Chief Executive which give due weight to the proper management and use of public monies.

Executive

The Executive comprises of officials who collectively represent a broad range of administrative and professional skills, expertise and experience. HSENI works in close co-operation with the devolved Departments, the Northern Ireland Office and the District Councils in developing its policies and in delivering its services.

HSENI is the enforcing authority for health and safety in a range of work situations including:

manufacturing; schools and universities; chemical plants; hospitals and nursing homes; construction; disciplined services; transport; district councils; gas supply and distribution; government departments; agriculture; fairgrounds; mines and quarries.

As an enforcing authority a significant proportion of its resources are directed towards ensuring compliance with the relevant statutory provisions. This is achieved through a combination of workplace inspection and investigation activities which are underpinned by Inspectors' extensive enforcement powers.

It plays a key role in the preparation of new health and safety legislation in order to ensure compliance with EU Directives and maintain parity with Great Britain.





It places great emphasis on the promotion of workplace health and safety best practice which it backs up with practical information and advice.

Resources

HSENI has a staff of 131, of whom approximately 75% are engaged in frontline service delivery where they interact directly with employers, employees or members of the public. This includes field staff such as inspectors, compliance officers and business advisors as well as staff who are engaged in communications and promotions work or who take and deal with telephone calls or visitors to HSENI's Information and Advice Centre. HSENI is funded by way of a grant-in-aid from the Department of Enterprise, Trade and Investment. In 2011/12 the grant-in-aid will be £6.8m to cover administration costs, such as staff salaries and wages and running costs, and to cover expenditure on items such as promotional activities and the provision of an information and advisory service. The grant-in-aid for 2012/13 will be £6.7m, for 2013/14 it will be £6.7m and for 2014/15 it will be £6.8m.

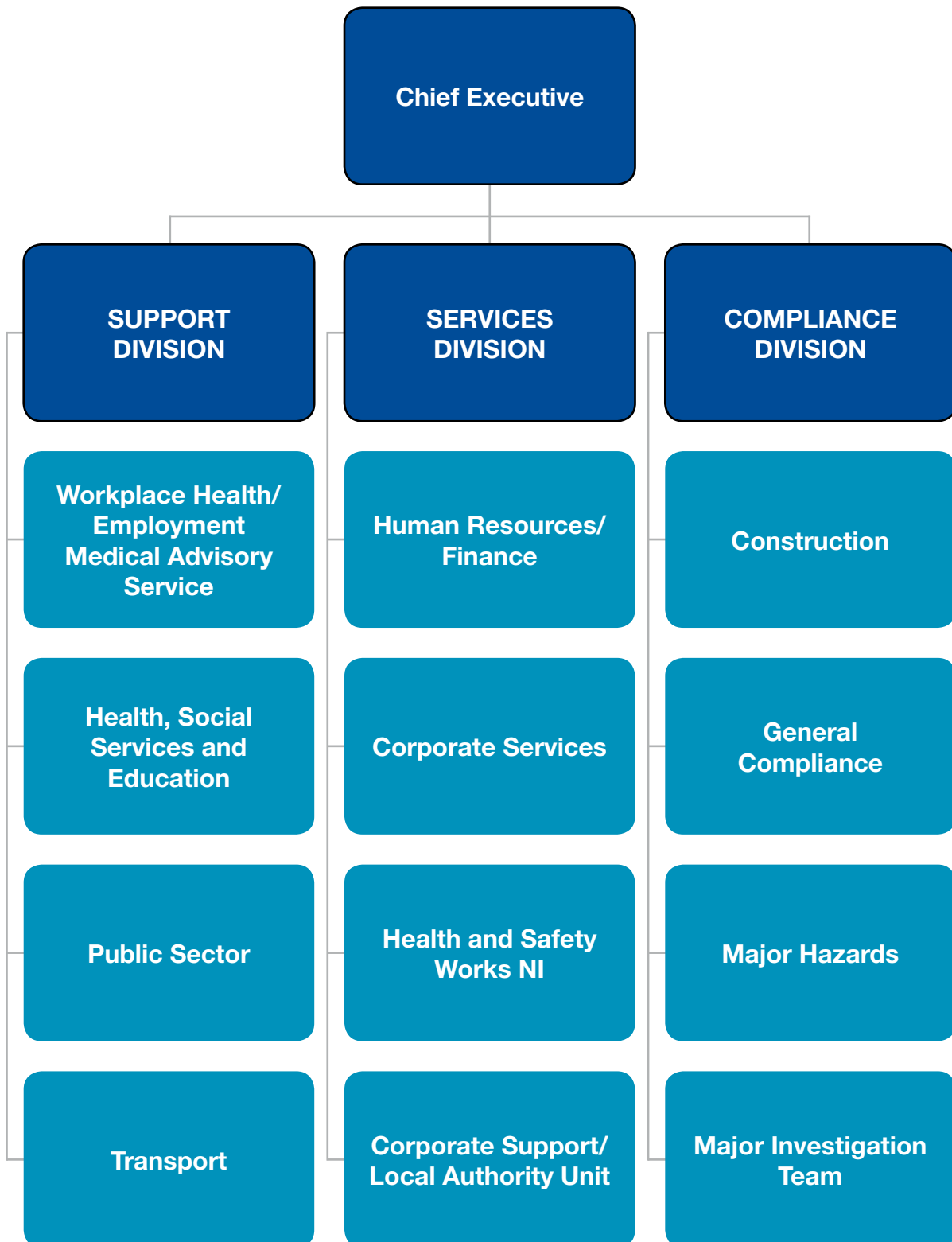
HSENI also has a senior medical officer seconded from DHSSPS to provide support to HSENI on workplace health issues including the delivery of its Employment Medical Advisory Service. HSENI meets the cost of this officer's salary and expenses.

The resources available to HSENI will be kept under constant review and, when appropriate, bids for additional resources will be made to DETI where these are needed to ensure that HSENI is equipped to deal with emerging pressures and to provide for future organisational development.

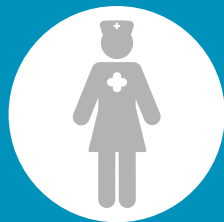
Annex 4: HSENI – Organisation Chart (at 1 April 2011)



Annex 4







Health and Safety Executive for Northern Ireland

83 Ladas Drive, Belfast, BT6 9FR, Northern Ireland

Telephone: (028) 9024 3249

Helpline: 0800 0320 121

Textphone: (028) 9054 6896

Facsimile: (028) 9023 5383

Email: mail@hse.gov.uk

Web: www.hse.gov.uk

A large type version of this text is available on request from HSENI.

The text of this document is also available on the
HSENI website: www.hse.gov.uk

FSC logo

ISBN 978-1-906452-17-9



9 781906 452179