



HEALTH AND SAFETY WORKER ENGAGEMENT AND ASSESSMENT TOOL [INFO 02]

This FDMF information document is one of a pair: FDMF INFO 01 covers Safety Leadership and FDMF INFO 02 Worker Engagement.

These documents are complimentary to each other and should be read together. Good leadership and engagement are critical in any safety culture improvement programme and are sometimes referred to as being two sides of the same coin.

Both documents follow a similar format with guidance on leadership/engagement followed by assessment tools to allow organisations and individuals to measure their and their organisation's level of leadership/engagement and put in place measures to improve.

Both documents are likely best used, and likely to be most effective, as part of a strategy to *improve* safety culture.

The **Food and Drink Manufacture Forum** (**FDMF**) is a partnership between Trade Associations, Trade Unions and HSE.





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Introduction and Scope

Positive worker engagement can have a significant effect in improving health and safety performance. Although this guidance and self-assessment tool was developed by worker representatives in the waste and recycling industry, it will be applicable in most if not all industrial sectors, including food and drink manufacture. They cover the four main areas that should be assessed in order to facilitate good worker engagement.

The guidance and self-assessment tool can be used by all workers in the industry including front line staff, safety reps, supervisors and managers. Although it is not intended for completion by safety professionals, their advice may be sought after the assessment has been completed.

The self-assessment tool allows an organisation to assess whether effective worker engagement exists. The guidance is designed to identify how to over-come some of the barriers by identifying what consistent and effective worker engagement looks like.

Assessment of worker engagement

It is widely agreed that there are four areas that need to be assessed in order to facilitate good worker engagement, these being:

- Workforce attitude tos afety
- Opportunities to contribute
- Communication
- Visibility





Workforce attitude to health and safety

Where a workforce, either collectively or individually, have raised concerns on workplacesafety issues and been ignored then it is perhaps not surprising that they are reluctant to engageinmeasuresdesignedtoimprovesafety. Bydemonstratingthattheirconcernsarenotonly listened tobutactedupon the attitude of the workforce towards safety can only change for the better. This may involve the need to improve managers and supervisor's communication skills to be effective and saying thank you occasionally also helps. In addition, a clear statement from senior management that that any worker has a right to refuse work that they feel is dangerous and overrides

getting the work done demonstrates a strong commitment to workplace safety.

Where there has been the breaking of safety rules the first approach should be to educate and correct the situation and not immediately engage the disciplinary process for first offences.

It is vitally important that anyone raising a health and safety concern does so from a genuine belief and not from a position of avoiding a certain task otherwise this may undermine the whole process.

Opportunities to contribute

Having the opportunity to contribute towards workplace safety can only reinforce the safety message in a positive way. There are a number of methods that can be used depending onthe type of work carried out, the size of the workforce and the geographical location and spread of the workforce.

These include holding regular, open meetings where issues can be raised without fear of reprisal - in effect a no blame culture and should take place at regularly agreed intervals (weekly, monthly, quarterly, twice yearly or annually).

Outside these meetings the provision of a suggestion box or other anonymous methods for raising concerns or

suggestions for improvement. Involving the workforce, unions, working groups or any person championing health and safety who carry out the daily tasks in decision making thataffects them, such as the provision of safety clothes or boots, is more efficient and better appreciated by those involved.

None of these should be used to replace regular safety committees where a more strategic approach can be taken. A nominated representative (union or otherwise) is a very effective way to get information to and from the workforce, a person who is trusted by both sides during discussion is a valuable asset.

Communication

Effective communication needs to be a two-way process. This might include consideration of issues such as literacy and numeracy, first languages, frequency and duration of any training and the method of training delivery. As a general rule, regular short tool-box talks can be an effective means of refreshing the workforce on specific aspects of risk and hazard.

These are thought to be best done in a largely pictorial way, presented by one of the workforce's peers (operative/rep/trainer) in conjunction with management to emphasise the collaborative nature of the training. It is important that sufficient time should be allocated for these sessions, preferably within the working day.

On an occasional basis the involvement of any client officer or customer could also be helpful. The use of noticeboards where possible should also be used though these need to be monitored and refreshed regularly.

The use of practical day to day advice during work, for example on changing traffic flow will also be appreciated.

In many situations the development of a team ethos can help raise the collective safety culture of a workplace.





Visibility

This is not about wearing the right protective clothing, important though that may be. It ismore about the availability of managers at all levels being able to discuss and investigate concerns that the workforce might want to raise, this might be described as positive interaction and not be portrayed as a talking shop.

This should be carried out in a consistent basis.

As part of this approach it is useful that managers do not just observe or monitor the operatives at work but actually undertake the tasks to get a better understanding of the main issues and how the public might interact with how the tasks are carried out. This approach might also help clients and if appropriate councillors in better understanding of the service they have specified. This approach helps to identify both bad and good practices.

Self-assessment of worker engagement

The self- assessment tools in tables 1 and 2 (see Appendix) should be used to give a snapshot of the level and quality of worker engagement in a workplace/ organisation. They should be completed as honestly as possible by all those taking part in the assessment.

Results should then be collated to give a view on how workers see if health and safety concerns are being addressed. The results should be shared using the relevant mechanism appropriate to each workplace including team talks or safety committees.

If the results demonstrate the need for improvements, which can be met by following the sections in the

accompanying guidance, then an agreed action plan, with realistic targets should be established.

This action plan should be monitored on a regular basis until the health, safety and welfare concerns are being addressed to the satisfaction of all involved. See FDMF INFO 01 on leadership for more information.

Note: In any sector of industry which is male-dominated it is important that any perceived *macho culture* is tackled and improved. Following this guidance and the self -assessment tool can only help deliver better standards of health safety and welfare across the industry.

Using the Self-assessment tools

To gain the best results from the self-assessment tools in tables 1 and 2 there are a few important things to consider prior to commencing a measuring exercise. The self-assessment tools are best used to take a measurement and then repeat the exercise after an improvement plan has been instigated to see if what has been implemented has worked.

Decide on your scope area

The desired scope could be your whole organisation or just a small cell of staff in a specific area however it is important that you set and note your area prior to starting as you will need to make reference to it the second time the self-assessment tool is handed out to ensure an accurate measurement is taken on both occasions across the same scope area.

Handing out the self-assessment tool

When encouraging staff to complete the self-assessment tool it is important not to just target individual worker groups, such as groups who are likely to be helpful or staff who are particularly opinionated or excessively negative, as this can artificially affect your results.

An example of this would be a manager who is pushed to obtain a good return so looks towards helpful friendly staff who will help them out.

This type of approach produces an artificial, inaccurate score that will not be useful for future reference when identifying areas for improvement.





Analysing your returned self-assessment tools;

Returned self-assessment tools fall under two categories, anonymous (no name attached) and named.

 Anonymously returned self-assessment tools can be grouped together with named onesto produce an overall score and an understanding of where your organisation is doing well or where it needs to implement improvements. When a second assessment is carried out afteran improvement plan the measurement tool results are collected in the same way(anonymous and named returns)

Note: end results will be affected by factors such as staff turnover and staff absence between the two assessments.

 Named returned self-assessment tools are the most valuable as these can be directly compared against each from the two assessments to accurately analyse any improvements.

Disclaimer and FDMF

This information document has been prepared by health and safety practitioners to assist health and safety improvements in the food and drink manufacture industry. It is endorsed by the Food and Drink Manufacture (Health and Safety) Forum. This information document is not formal guidance and represents good practice, which typically may go beyond the strict requirements of health and safety law.

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This information document is not a substitute for duty holder and/or professional safety advisor's judgment, Notwithstanding the good practice in this document, duty holders are responsible for ascertaining the sufficiency and adequacy of their internal and independent procedures for verifying and evaluating their organisation's compliance with safety law.

The FDMF exists to communicate and consult with key stakeholders, including local and national government bodies, equipment manufacturers, trade associations, professional associations and trade unions. The aim of FDMF is to identify, devise and promote activities to improve industry health and safety performance.

Further reading

FDMF INFO-01: Safety leadership in food and drink manufacture assessment tool





Appendix

Assessment Table 1 – The four main areas of employee engagement

This first table is largely designed to be completed by individual members of the workforce.either anonymously (likely to encourage greater participation) or identified by name/reference (likely easier to track performanceover time, in particular if you have a high turn-over of employees). It may also be useful to compare replies from different groups, such as frontline workers and managers. However, your use of it will depend on your specific needs and situation.

1 Workforce attitude to safety	YES	ИО	Comments
Do your work colleagues take everyone's safety seriously?			
Do you think your views/concerns on H&S are taken seriously and acted on?			
Are reported hazards acted on promptly and feedback supplied?			
Would you refuse to do a task if you thought it was dangerous?			
2 Opportunities to contribute	YES	ИО	Comments
Are regular meetings held where Health & Safety issues are discussed openly?			
Do you feel issues can be raised without the fear of reprisal?			
Do you have someone to go to that you can trust on H&S issues?			
If so,who is that?	NA	NA	
Is there a designated safety committee in your workplace?			
2 Communication			
3 Communication	YES	NO	Comments
Is there a problem with literacy or English as a second language in your workplace?	YES	NO	Comments
Is there a problem with literacy or English as a second	YES	NO	Comments
Is there a problem with literacy or English as a second language in your workplace? Are regular tool-box talks and training held to review	YES	NO	Comments
Is there a problem with literacy or English as a second language in your workplace? Are regular tool-box talks and training held to review Health & Safety procedure's? Is there sufficient time allocated for all training within the	YES	NO	Comments
Is there a problem with literacy or English as a second language in your workplace? Are regular tool-box talks and training held to review Health & Safety procedure's? Is there sufficient time allocated for all training within the working day? Is this type of training seen as a joint exercise between	YES	NO	Comments
Is there a problem with literacy or English as a second language in your workplace? Are regular tool-box talks and training held to review Health & Safety procedure's? Is there sufficient time allocated for all training within the working day? Is this type of training seen as a joint exercise between management, workforce and reps? Areanyothercommunicationmethodsinuse?	YES	NO	Comments
Is there a problem with literacy or English as a second language in your workplace? Are regular tool-box talks and training held to review Health & Safety procedure's? Is there sufficient time allocated for all training within the working day? Is this type of training seen as a joint exercise between management, workforce and reps? Areanyothercommunicationmethodsinuse? E.g.noticeboardsorradios.			
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Assessment Table 2 - Quantified results/scoring

As for table 1, this table uses the four main areas of engagement as its framework, but with a quantified scoring system. It can be completed by individuals or groups, such as site-by-site, by different groups within the workforce on one site, frontline workers and management etc. How you use it will depend on your situation. However, and as for table 1, the aim is to identify areas of weakness and strength, celebrate the strengths and put in place a strategy to address the weaknesses – then reassess periodically to ensure you really are improving.

	Workforce attitude to safety				Opportunitiesto contribute				Communication								
Questions/Outcome	Concerns are taken seriously and acted on promptly	I am supported when I refuse work I feel is dangerous	I am appreciated for my contributions towards safety	I am positive about Health & Safety and raise concerns	Regular meetings are held to raise my concerns	l can raise concerns anonymously outside of meetings	I am involved in decision making concerning my Safety	Unions, working groups & individuals all work on safety	Regular training and tool-box talks are carried out.	Variedmethodsofcommunication are used for meetings	I am given time in the day to attend training / meetings	The health & safety noticeboard is updated regularly	Managers are available at all levels to listen to my concerns	Managers understand hazards & risks associated with my role	Senior managers support Health & Safety	Senior managers attend important meetings / briefings	Totals
Never	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sometimes	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Usually	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
Always	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	
Final assessment score																	

What does my final score value indicate?

- 0-11 None/very little effective worker engagement exists
- 12-23 A foundation of effective engagement exists, improvements are necessary to achieve a better standard
- **24-35** Generally good standard of worker engagement but a consistent approach needed to improve standards
- **36-48** Excellent level of worker engagement, consistent and effective measures are used



