



Roger Bibbings Occupational H&S Advisor RoSPA - The Challenge to Behavioural Safety

BEHAVIOURAL SAFETY USER CONFERENCE 2005

Musical intro "Do you really want to hurt me"

Roger Bibbings

It was a redoubtable gentleman Sir Thomas Lake who was the father of occupational medicine, a very principled Edwardian man who stood out against the British government in the ILO over asbestos in the 1920s. He was certainly not a socialist, he was an old time liberal but he came up with this famous saying, the employer has done everything, the workmen can do nothing.

I think that in the 21st century we might find that sort of sentiment rather patronising and unempowering for people in the workplace today. But what I would like you to reflect on is that if you take the five HSE priority topics, and you will be familiar with HSE's hazard and risk priorities, muscle and physical disorders principally back injury, slips, trips and falls site transport, stress and falls from height. In HSE's current approach the interventions they are calling for are principally system and technology focused rather than behaviour. It is not to say that behaviour does not have a part but in back injury they are looking for a focus on mechanical lifting and although their new MAC assessment tool, for example, has got a very strong connection with behavioural safety, it encourages people to observe behaviours, it is really trying to get people to eliminate manual handling, slips, trips and falls and is focussing on micro-surface roughness and flooring and footwear interactions, site transport one way systems and pedestrian exclusion, stress removal of stress rather than coping and falls from heights, systems of access protection nets. So HSE is very much focussed still, I would suggest to you, on technology and work organisation in addressing their current priorities, I will leave that thought with you.

One of the more interesting parts of my previous life in safety was to visit the Chernobyl site one year after the accident and that was quite a salutary lesson for me and it was during the time of glasnost and perestroika.

The Chernobyl accident in a way played a part in tipping the old Soviet Union into change. But one of the interesting lessons that I take away from that was they said the cause of this accident was that the operator broke the rules and those of you from the British Nuclear Industry know that that whole philosophy of controlling a risk of such high consequence was completely unacceptable in the West and control of high consequence risk particularly in our culture, we don't leave it to human reliability we build in many more lines of defence.

I suppose Chernobyl and the concept of safety culture further supported the drive in the UK towards a risk based rather than a rule based approach to safety and the Health & Safety Commission, I think quite rightly, although they put a lot of emphasis on practical guidance still support the idea that our Health & Safety law should be goal and risk based and should be based on assessment and people making judgements rather than trying to prescribe for any situation. This is not a popular doctrine with small companies, nor with contractors, nor indeed with many in our own organisations who want the law to prescribe with certainty exactly what they should do. But we are moving into an environment where people need to be made responsible for and empowered to make judgements about safety.

Behavioural Safety as I understand it puts a lot of emphasis on our ability to observe, understand and change behaviour before changing underlying attitude and I may misunderstand this point and I stand to be corrected if I have misunderstood this point, but there is a strong emphasis on trying to change the observable rather than the unobservable which is what is going on inside people's heads and also there is a charge, and again I stand to be corrected, that behavioural safety focuses too much on what happens at operational levels rather than what happens at management and particularly senior management levels, it doesn't focus enough on what is going on in people's heads.

I stand to be corrected on this but these are some of the observations, which are made to me by colleagues including in the Health & Safety Executive.

I think in general we still have, despite excellent publications like HSG 48 and so on a poor understanding in industry, in the world of work about the nature of human error, many people are inclined to see human error as wilful stupidity or bloody mindedness, not to say there are not occasions when it is of that sort, but the really interesting and powerful part of HSG 48 is the popularisation of James Reasons', I don't think they were originally James Reasons' ideas but they were associated with him, his taxonomy or his classification of error types, slips and lapses, things like impairments and distractions, mistakes which he says are either skill or rule based and violations which he classifies as exceptional, situational or routine.

We have come to understand that human error is an extremely complex phenomenon and these error types themselves can, in different situations, be mixed up together and we have come to understand particularly through the admission of this sort of evidence into public enquiries. I was thinking particularly of the Ladbrook Grove enquiry where Debbie Lucas from HSE's human factors unit gave important and decisive evidence. We have come to understand that human error is very often the last link in a long causal chain of disaster. It has taken us a long time to get in particular, QCs and Judges to understand this, in the public enquiry context but I think we need to continue to challenge our colleagues, do they really understand the complexity of human error, the way it presents and where it fits within the overall causation of accidents, particularly when it comes to the question of violations. Violations are classified as deliberate rule breaking and put simply it is alleged that we violate because we can, because we need to, because we want to. We violate to meet demands placed upon us, to cut corners, to conform to group norms.

I rather like the little saying of Professor Steve Stradling who we do a lot of work with on Road Safety – there is a violation plus error equals crash – in other words, if you travel on the motorway too fast, too close that is OK but if you make an error, if you are distracted for example by receiving a call on your mobile phone then when the traffic in front slows up too quickly you crash. So your violations, you can get away with violations provided you don't make any errors. An error is a complex and intellectually challenging thing and we need to reflect on, particularly in violations, on the question of motivation, on whether or not people are violating because their safe behaviours are conflicted by particular imperatives or they may be under pressure to respond to business goals or they may quite simply be bored and want to get some sort of thrill out of life.

So I put a lot of emphasis on this question of HSE 48 and the need to continue to encourage people to reflect on that. It is what I regard as a very useful publication.

I would suggest that we need to look at behaviours not just as empirical facts but as clues, as I think our chairman has already alluded it is not just that people are behaving in certain ways we need to see that as evidence to prompt further enquiry and it is very important, as I say to understand error types combinations and contexts and to understand which error types can be addressed, for example, through coaching and mentoring. I would suggest that slips and lapses really can be addressed through mentoring and there are other issues to be addressed there. Mistakes, skill and rule-based mistakes can be addressed through mentoring and training. Which kinds of violations can be best addressed through coaching or which are best addressed through making changes to systems of work, I stand to be corrected if perhaps I haven't understood these things entirely but I think these are relevant questions. So the fundamental question is where does safe behaviour sit within the hierarchy of options for control, you are familiar with the hierarchy of elimination, reduction, isolation control and the adaptation of behaviour and personal protection and so on, fit within that hierarchy in any particular situation.

Consider for example a contractor working at height off a ladder, this may be quite a common situation that we observe, we may choose to have a positive safety conversation, that might not be a bad idea or we might see that as a clue and go and scrutinise CDM procedures to see how these people have been selected, whether there was a method statement, whether there had been adequate induction, whether there was adequate supervision and if 2 and 3 in that list were OK then why was that person willing, motivated to work in that way and not in the safe way that had been prescribed.

So my thought, and this is not just word play, is we need to reflect on whether safer people make for safer organisations, or safer organisations make for safer people, that might seem rather like a silly chicken and egg proposition but I think by going round those loops, if you like, in opposite directions, and if we take an holistic view, we may be able to get a better understanding of the contribution that behavioural safety can make particularly if it is focussed

as a result of analysis of what is going on in the workplace, the accident trend, investigating accident by type and causation, by taking account of things like safety climate surveys and so on.

Observation particularly, in my opinion, training people to observe behaviour as a powerful contribution to make, not only in monitoring in active monitoring of performance, are things happening the way we think they should happen, but also in things like assessment. I was at a presentation again yesterday on the use of the HSE's MAC tool, how many people have used the MAC tool, 1,2,3, not many, it is on the agency website, go and look at it. It is a fascinating and very simple practical guide to observing manual handling behaviour, looking at elements of manual handling behaviour and helping you to make judgements in order to arrive at aggregate scores about the risk and enabling you to prioritise manual handling operations for mediation.

So the observational side of behavioural safety I think could even be under-exploited in the context of traditional health and safety management systems.

So I will leave you with some parting thoughts:

- Behavioural safety and abnormal conditions – one of the things that accident investigations invariably show is that things on the day were happening not quite as they should be, there was always variants and that is why, for example there traditionally has been an accident rate during maintenance operations because maintenance operations are not the normal condition. To what extent is behavioural safety applied to normal operations and to what extent can it help us understand the constraints and challenges of the abnormal.
- Behavioural safety and health - the Health & Safety Commission says that health is a bigger problem than safety, 2.2 million cases of ill health made worse by work 1.1 million workplace injuries. Certainly behavioural safety has an application to the protection of health particularly in things like use of PP and so on but what about the relationship between health impairments and safety? We are going to hear later on today about drink and drugs and so on but what about questions like stress and fatigue and their impact on human reliability and their impact on slips and lapses and so on. I think there is an interesting area to be explored here so is behavioural safety and health I would suggest.
- Behavioural safety and management leadership – there is a lot of focus on leadership at the moment because of corporate killing which is going to be an offence of corporations not of individual directors but the test will be the behaviour of senior managers. To what extent are we observing the behaviour of senior managers as part of behavioural safety? We did an interesting project and it is on our website called 'Back to the Floor' looking at the involvement of senior managers in front end health and safety activities such as tours and inspections and so on, there are quite a few gaps we found in our research so I suggest there is a need to be a focus there.
- Workforce consultation and empowerment – I think this can be a very powerful way of involving safety reps, are there many safety reps here today? and also as a source of KPIs and we in RoSPA are very strong on the idea that we should try to get away from lagging indicators of performance and accidents, incidents and so on and we are looking for other indicators successful application of control, behaviour is part but not the whole story, but part of it.

So to conclude and I have run out of time haven't I? Yes you are nodding – right – but I will conclude with some key questions.

- What are your expectations of behavioural safety?
- What do you think it can do?
- Where should behavioural safety fit within your overall corporate health & safety improvement strategy? In other words, where does it fit as part of all the things you are doing?
- Which approach is best for you?
- Where can behavioural safety deliver most for you?
- And most importantly what other interventions are still required?

I hope that during the day I will learn something and I will be told that I have not quite understood everything about behavioural safety, I confess that, but what I do feel very strongly about, is that we need to see this as part of the wider jigsaw part of the patchwork of interventions and techniques which need to be applied to help our organisations move forward and improve their health and safety management performance.