NEBOSH and HSE: Leadership excellence at Expo 2018



There was standing room only earlier this year as NEBOSH and the Health and Safety Executive (HSE) opened the Professional Development Theatre at Safety & Health Expo 2018.

Matthew Powell-Howard, NEBOSH Qualifications Development Manager, hosted an interactive session with Ed Corbett, HSE Head of Human Factors and Organisational Performance, and Jane Hopkinson, HSE Senior Psychologist.

To mark the launch of the NEBOSH HSE Certificate in Health & Safety Leadership Excellence earlier this year, the panel ran a question and answer session to help the audience with their leadership challenges. In this article we look at some of the key questions from that session...

- How can I encourage my senior leadership team to be more visible?
- What are the good and bad ways of measuring health and safety performance?
- How can I get health and safety into a metric that can influence leaders?
- We've seen some interaction recently between leadership and the workforce; the feedback from senior management was that they couldn't understand the accents of the workforce! How can we address this communication breakdown?
- <u>Can leadership be taught?</u>
- <u>How can I go about changing the culture within the</u> <u>organisation without upsetting the board of directors?</u>
- What are the best engagement tool(s) we could use?



Matthew Powell-Howard, NEBOSH Qualifications Development Mangager

How can I encourage my senior leadership team to be more visible?

Ed: The first thing for me is that there can be very different perceptions of what visibility is.Senior leaders can often think they need to be getting out and walking around to be seen as being visible.

For people further down the hierarchy it's more about the engagement; having conversations with people, asking questions, getting to know them personally and understanding what motivates them.

I think the first thing would be to make sure there's clarity around what 'visibility' means; so senior leaders understand what is going to be beneficial to their teams, recognise what they want to get out of the activity and then close that gap so they can get people more engaged and contributing to health and safety.

Jane: I would just add to that, from my experience, is that people are often focussed on meeting KPIs or a certain number of management walkabouts each month. Really, we need to consider what the purpose of that walkabout is all about. Not just in terms of managing the achievement of that KPI but what's the purpose of that engagement with the workforce?

What is the workforce getting out that activity? What is the manager learning or understanding about the issues that their staff are facing? It very much needs to be that two-way communication with people, not just ticking that box.

Ed: We hear about organisations where leaders are doing walkabouts where there is the perception that it's just a quantifying metric for achieving a certain number of walkabouts in a reporting period. I think people see through the quality of actually caring about people and it can lose credibility for health and safety when it just becomes a quantifying metric.

Matthew: There's lots of nodding heads here. I think some of the audience agree that there can sometimes be a last minute dash to achieve KPIs.

What are the good and bad ways of measuring health and safety performance?

Jane: We can be very focussed on the lag or numerical indicators such as the lost time stats, the accident stats. But, you really the need the mix of proactive and reactive measures, so the quantitative and qualitative indicators as well.

You need to be looking at what information you're getting back from walkabouts, for example and what information you're getting from the workforce – the engagement and collaboration with them. You need to look at other measures rather than getting hung up on just the reactive numbers.

Ed: Sometimes those metrics can create new issues. For example, with lost time injuries or lost time injury frequencies, the emphasis on measuring those and achieving those can result in ways to achieve the target number without actually improving health and safety. We've seen examples where someone is seriously injured and then get given a laptop so they can work while they're in hospital or at home recovering so that lost time metric is met.

So, it's really important to think about what you're measuring and why you're measuring it. And also, how might that metric influence managers to behave because sometimes they could behave in a way that wasn't intended. In health and safety we really find that qualitative measures, speaking to people and that element of storytelling, should accompany the numbers.

We see a lot of focus on statistics or making things amber instead of red rather than really understanding what's happening behind those numbers. It also takes away the human element; when you see a standalone statistic you won't always see the story behind that. In some instances, we've seen organisations with a falling lost time injury frequency rate but there's been more fatalities.

How do you differentiate health and safety? For example, we see safety metrics concerned with slips, trips, falls and acute things. Whereas when we look at health and exposure to noise for example, how do I get that into a metric that can influence leaders have a longer term impact?

Jane: Again, I think we've got to be considerate of the fact that we need to be going out and gathering that qualitative data and communicating it.

There is often a tendency to treat health like safety but I've done quite a lot of work in health culture and we've got to be aware of the differences, for example in terms of latency, consequences, perceptibility of the hazards, the difficulty in teasing out the causes and effects. So we have to be aware of these differences when we're thinking about health as opposed to safety.

But again, the key thing is getting out and about. Measure your stats, absolutely, but also engage and communicate with your workforce; why is it they're not wearing their PPE? Is it because it's not available? Is it because it's uncomfortable? Is it because of peer pressure? You will only find out the answers to these questions by actually communicating with each other.

Ed: Health is often the silent part of health and safety. Managers often 'get' the safety side of it but struggle with health, given that it's much longer term. We also forget sometimes that, in the UK particularly, many deaths we see are latent. For example, there are about 14,000 respiratory deaths.

There is a fear sometimes that you're opening a can of worms. If you start to monitor health does that mean that it's going to cost the business money? I would argue that it costs more if you don't look at it.

Jane: We also found when we were doing the health cultural work that there were lots of organisations that were doing wellbeing initiatives – free fruit in the canteen for example – that thought that were doing really well on health because they were doing these things. But actually, when we looked at how they were managing the traditional risks, such as noise and dust, they weren't managing those as well as they could have been. So it's just being aware of the fact that, don't think you're doing fantastically well just because you're doing wellbeing and measuring blood pressure at work. You need to remember to manage the traditional risks.

We've seen some interaction recently between leadership and the workforce; the feedback from senior management was that they couldn't understand the accents of the workforce! How can we address this communication breakdown?

Jane: As someone with a very strong Scottish accent hopefully I can help with that question!

That sounds very much an issue with the leaders, I would say. I think you need to make sure you're targeting and tailoring your communication for the audience it's intended. If you're working with multicultural, diverse employees then it's about making sure the messages you want to get across [to the leaders] are delivered in the appropriate way for that audience and by the appropriate person.

That may be a trusted and respected peer from within that group [workforce] who can communicate, not just to the senior leaders but also 'informal leaders' that have influence within teams. I think it's about identifying what message you want to get across, who the best person is to deliver that and what the best way is to deliver that.

And of course it's important to check understanding. Deliver your message and check that it's been received and understood.

Ed: It comes back to leadership style again. A common barrier we come across is that resistance to feedback. One of things we expect from good leaders is receptivity. However, people respond to negative feedback in different ways and you have to think about the way you deliver feedback to them.

Matthew: I think it's important to remember that leaders are not necessarily the people with the highest salary, they can be at all different levels of the organisation.

Can leadership be taught? And, if not, should those people be in positions of leadership?

Ed: My personal view is that leadership skills can be developed. Of course there are elements of their personality, their values and how much they care. However if they are too far adrift from what is needed, then probably there is a limit to how much those skills can be developed.

Maybe there is room for better selection, promotion and development of leaders so that businesses are picking the right people for those roles and that they genuinely care.

Emotional intelligence is critical to business – and health and safety – success. You'll commonly see that people are promoted on technical competence but not necessarily the soft skills they need to lead.

Jane: I think very often we see that in frontline leadership - so team leaders and supervisors – people are promoted for their technical abilities but aren't given any additional support from the organisation to help develop their interpersonal skills. I think that's a key gap and something that businesses should focus on more.

The safety culture in my organisation isn't great. The managing director and senior directors like to point the finger of blame when something goes wrong. How can I go about changing the culture within the organisation without upsetting the board of directors?

Jane: I think the important thing to get across to the senior managers is that they're very much responsible for setting and driving the culture of the organisation. So you need to be considerate of that but also of the culture that you already have.

So you don't want a blame culture where the approach is to apportion blame to the end user. It needs to be about promoting a culture of fairness and trust, somewhere where you've get consistency, accountability and recognition at all times, at all levels. Senior managers have a key role to play in that.

Ed: We still see that blame culture as being quite prevalent across lots of different sectors and it can be detrimental to learning and improving in organisations.

When we're doing an investigation, we interview people and their stories will become distorted to protect themselves if they feel there is blame. So the more of a blame culture there is, the less learning will happen if things go wrong. I think there's still that misunderstanding with a lot of senior leaders about why people fail in jobs; generally people don't go to work to cause harm or to injure themselves or others. It's very rare that there's malicious intent.

Educating senior managers and senior leaders about human error, systems failure and organisational issues is a really key part of leadership development. You'll actually get more organisational learning than blaming or firing individuals.

As a business we send out lots of communications and we spend quite a lot of money on doing this. These go out to the workforce on various health and safety issues and I am also part of the health and safety committee but we rarely get feedback from staff to help us drive improvements. What do you think we're doing wrong and what's the best engagement tool(s) we could use?

Jane: One of the key things in that question is that they're sending out lots of information. You'll often find organisations have masses of information about health and safety that gets sent out and it can get lost. If they're overburdened with too much information people won't read it.

Again, it comes back to the key questions; what information are you giving? Who is your intended audience? What is the best way to deliver it to that audience? There are no hard and fast rules for communicating with your employees. I would say, use a variety of mechanisms – face-to-face, email etc. – there is no one answer to that question. Know your audience.

Ed: I know there's a lot of effort that goes into communications. We see things like safety alerts which people see as a valuable way of sharing when things go wrong and hopefully getting staff to learn. Actually a lot of effort has gone into creating that safety alert and sharing it around the organisation but it doesn't have the impact that was intended.

Is creating this amount of information and sharing it across the organisation adding value? It's probably better to do less of that and filter out the important things like risks that could be managed better and things that could solve someone's problems.

For more information about the new NEBOSH HSE Certificate in Health & Safety Leadership Excellence, visit <u>www.nebosh.org.uk/leadershipexcellence</u>

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