

Delivering Messages to Your Board in a Way that Will Ensure They Will Listen

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Abstract

OSH professionals are often technically competent but not always able to communicate well with their directors or influence them. This paper discusses how OSH professionals can persuade management to focus on health and safety. It highlights the skills they might need to learn to do so. It covers the need to make functional alliances, to learn the right influencing style and to communicate in a multi directional way to suit different audiences. The important role of leadership in the improvement of safety culture is discussed and other areas, where the OSH practitioner can have an important role, such as the wellbeing agenda and in maintaining the organisation's reputation.

Introduction

Senior managers are ultimately responsible for ensuring the health, safety and welfare of their employees. In the UK, the HSW Act (1974) requires employers “to provide a place of work which is safe and without risk to health as far as reasonably practicable”. The Act does not specify how employers are to do this however. This creates a market for the occupational safety and health (OSH) professional to assist senior managers by giving competent advice. (Atherley & Hale 1975, Grainger and Joyce 2011). Since 1992 however, to comply with the requirement of the European Directive (89/391/EEC), it has become a legal requirement in the UK to seek competent advice and appoint a designated employee to advise on health and safety risks. Arguments still continue today about what is meant by competence, but generally it is accepted that this involves appropriate qualifications, experience and knowledge (see Holden and Vassie 2010 for a full discussion).

OSH professionals may be competent in their chosen field and technically excellent but this may not be enough to ensure that their advice and messages are heard at board level. Health and safety is not always a priority for senior management and can have a "bolt on" status (James

2003). This means that OSH professionals may not be involved in important decisions regarding work processes at an early stage.

Good health and safety management is good for business. Proactive health and safety management is linked to improved organisational performance and health at work. Ward, Haslam and Haslam (2008) carried out research looking at how different sized organisations in different sectors varied when it came to their performance, as measured by profit margins, turnover and sickness absence and the attitudes and wellbeing of their employees. They found evidence of a link between increased profit margins and a more proactive approach to health and safety management and a reduction in days lost to accidents. Regarding well being, they found that higher levels of vitality were linked with a greater personal appreciation of risk and positive perceptions of the physical work environment. Respondents who worked in the same sector reported a more positive safety climate and experience better health and wellbeing if their organisation had a proactive approach to health and safety. OSH professionals are therefore in a key position to influence factors of benefit to the business.

However, what does an OSH professional need to do to get their voice heard? This paper will discuss how OSH professionals can influence management to focus on health and safety and the skills they might need to learn to do so.

Getting the OSH professional voice heard

Making functional alliances

Who does the OSH professional need to communicate with? Basically the answer is “anyone who can make things happen” within the organisation. This can range from directors at Board level to supervisors and workers on a factory production line. It’s important for OSH practitioners to make “functional alliances” within their own organisations to make sure they are part of any discussion on risk. OSH professionals need to maximise their position and not get lost in the detail of doing the job. However they also need to be realistic about the level of engagement they can achieve and try to engage with the business at that level. Or, as Byrne (2013) points out, should OSH practitioners concentrate on the "early adopters" - those people who embrace new ideas with enthusiasm and will help to spread it through the organisation?

In order to make functional alliances, OSH practitioners need to be clear about their vision for health and safety. The next step is to look for common ground with the manager, the OSH practitioner wishes to influence. Cialdini (2004) highlighted six points about persuasion that can help generate a positive response. These are reciprocity, consistency, social validation, liking, authority and scarcity.

Reciprocity involves giving the other party some information to help them so that they are more likely to want to help you in return. People like to be consistent, so it’s important to remind them of some successful initiative they have been involved in previously. Social validation in the form of peer power is a good persuader – if the manager thinks other managers are co-operating and have gained benefits, they will not want to be left out. Rapport is vital. Establish a friendly positive attitude when you present your vision, use open body language. The OSH practitioner will have expert power (Raven et al 1998) in health and safety and this will give them authority. However, it’s important to make sure you have thought through your

argument and have all the facts available. If there are any problems or a downside, then raise this yourself, so the other party can't use this information to argue against your vision. The final point is 'scarcity'. Access to exclusive information makes a case more persuasive. Successful influencing requires planning but also enthusiasm, sincerity, energy and resilience.

Communication skills

Health and safety can be regarded as complex and it is the job of the OSH practitioner to simplify the messages and make them relevant to the people they advise – using language that will fit into the business culture. Messages will need to be tailored to different audiences. This requires not only competence in occupational safety and health but good communication skills.

Evidence from IOSH part funded research looking at lessons learned from the 2012 Olympic park construction project indicated that key factors in the high standard of health and safety achieved there included effective communication and good leadership. Along with worker involvement, this helped to develop a climate of trust. Communication was multi directional and included formal network. Success was due to their co-ordinated approach to communication.

“Holdpoints” were included in method statements to allow regular review of work carried out. Otherwise there were many opportunities created for communication such as regular project safety leadership team meetings, safety forum meetings risk assessment briefings, workforce representative meetings, safety circle meetings, and one to one interviews between workers and supervisors. Good practice was also shared between contractors and clients. Specialist software packages were used to help the exchange of health, safety and environmental information between the Olympic Delivery Authority (ODA) and contractors. This information assisted monitoring of the safety climate. This illustrates the need to make the opportunities available to talk about health and safety.

The strategy went beyond paperwork and the health and safety management system and engaged people in the process. Cheyne et al (2012) also highlighted the importance of helping people to understand why a health and safety measure was necessary not just what they needed to do. Anecdotal evidence from Ludhra from an African visit also highlights the importance of understanding why some employees might have casual attitudes to health and safety. In this case, their living conditions in their villages were without basic provisions such as shelter and water with diseases such as HIV being rife. In this context it was difficult for them to take on messages about personal protective equipment.

Presenting health and safety information in different formats was also important. For example as Wusteman (2012) explained e-learning packages translated into many different languages were used for health and safety inductions.

'Visual Standards' were developed in consultation with contractors which identified 'what good looks like' and 'what bad looks like'. This involved taking 74 photographs of key risk areas. These were put into a manual made of waterproof material and could be used by supervisors to explain the standards required. This helped ensure consistency across the site and provided a method of communicating easier with those on the site, who were migrant workers. This helped establish the positive health and safety culture, which has resulted in the safest project to build an Olympic Park ever. For full details see <http://learninglegacy.london2012.com>

The role of email must also not be overlooked. Email has also changed the way in which people make decisions. Over the last few years it has become more difficult to take a decision alone because of the increased ease of consulting other people first. So OSH managers need to make sure they are on that vital mailing list! Organisational processes can reinforce this reliance on email as it makes a good audit trail. The downside is that it can lead to a defensive culture in the workplace and risk aversion

The importance of leadership

Of course the Olympic project also benefited from a clear vision, priorities and a strategy for health and safety and the leadership structure established ensured that health and safety was fully embedded and helped collaborative working at all levels. The dedicated Safety, Health and Environment Leadership Team (SHELT) devised an overall strategy, which was translated into practical project plans by specific project leadership teams further down the chain.

Hidley (1998) highlighted that the quality of leadership was a key factor in the success of any safety initiative. Leadership skills are therefore very important. Research has shown that the style of leadership, for example whether it is transactional or transformational can affect safety behaviours and both are important for effective safety leadership.

Transactional leadership is when an OSH manager gives instructions on what needs to be done and determines the reward for getting it right or the penalty for not doing so. It also covers monitoring and taking corrective action. In other words these are the types of day-to-day jobs that would occupy an OSH manager. This style of leadership is positively related to performance. Clarke (2013) highlights the importance of transactional leadership in promoting safety compliance. However, it is important for OSH managers to ensure their individual effectiveness and be able to move beyond “functional competence” (Cheetham and Chivers (2005), where they may focus on traditional tasks such as inspection, risk assessment and auditing to look at how actual behaviours within the workplace can be influenced.

If OSH managers want to encourage safety participation rather than just compliance then they need to have a transformational style of leadership. Transformational leadership has four aspects. These are “idealized influence”, “inspirational motivation”, “intellectual stimulation” and “individualized consideration” (Bass et al 2003). A leader displaying these behaviours will be trusted and respected by co-workers and will take account of their co-workers needs. They will inspire a vision for the future and will motivate their co-workers to achieve it. They will encourage their co-workers to question procedures and to be innovative in finding solutions to problems. They will mentor co-workers and encourage their development. These actions will help to improve the safety culture of the organisation.

Safety culture

The term “safety culture” was coined by the International Atomic Energy Agency in their report of the Chernobyl accident in 1986.

“The accident can be said to have flowed from deficient safety culture, not only at the Chernobyl plant, but through the Soviet design, operating and regulatory organizations for nuclear power that existed at the time. Safety culture [.....]

requires total dedication, which [...] is primarily generated by attitudes of managers of organizations in their development and operation.”

(INSAG-7 (1992) accessed 5 March 2013)

Culture forms the context within which people judge the appropriateness of their behaviour and influences human behaviour and human performance at work.

Perceptions of senior managements' attitudes and actions have been emphasized as influential in the development of a positive safety culture (e.g. Zohar 1980, Cooper and Phillips 1994). These perceptions can also be affected by how senior managers are portrayed by supervisors. Clarke (1999) in her study of British Rail employees found that senior management's attitudes and actions may be subject to negative stereotyping by staff and supervisors. This highlights the need to ensure that managerial messages are communicated accurately and that the commitment to safety improvement is shared by the whole workforce.

Carrillo (2002) highlighted the role of trust and credibility in safety excellence. It's important for safety officers and committees to be credible and this can also be a two way process as their credibility can be affected by the corporate culture. (Gadd and Collins 2002). Therefore it is important for the OSH practitioner to be proactive in dealing with safety issues to lead by example and work safely.

The challenge for those with health and safety leadership is to know at what level the safety culture is operating, to decide how it could be improved and to plan a way to achieve this. They have a primary responsibility for fostering cultural change and sustaining a sound safety culture once it is established. A safety climate survey can be used to measure perceptions and attitudes towards safety and can provide a snapshot of the underlying safety culture. For a complete list of tools see Smith and Wadsworth (2009).

IOSH sponsored research by Smith and Wadsworth (2009) found that where employees' perceptions and attitudes towards safety were more positive they had fewer accidents and a greater sense of health and wellbeing. Results suggested an influential relationship between advice and performance and that safety culture was consistently related to safety performance. Positive employee attitudes to and perceptions of safety were associated with better individual safety performance, health and wellbeing.

Olsen et al (2009) in their study exploring the effects of a large-scale safety programme implemented by a Norwegian petroleum company demonstrated the importance of developing employee commitment and implementing programme activities such as films, posters and tasks that all departments had to discuss for increasing the likelihood of cultural and behavioural effects on safety. The most important cultural change found was that it had improved communication between workers and made it easier for them to intervene if others were working dangerously. Workers felt that the safety programme had improved the safety culture and demonstrated that safety was a top priority. The programme had also made them more attentive to risks in their workplace. In a subsequent study (Bjerkan 2010) highlighted the importance of targeting SHE interventions at a work group level as well as to the organisation as a whole. Differences in subjective health status and reported accidents in different offshore groups were influenced by perceived work safety climate.

Better safety performance requires that knowledge of all incidents, near misses, and concerns are captured and learned from. It is important to create a reporting culture and along with this a culture of “fair blame”, in which standards are clear but the most reckless health and safety failures can be reported without fear of retribution. A “no blame” culture is not really feasible. A small proportion of unsafe acts deserve severe sanctions and failure to recognise this would undermine the culture of the organisation.

Poor safety culture has contributed to many major incidents and personal injuries, not only to Chernobyl but also Zeebrugge, Piper Alpha and Three Mile Island. Investigations into disasters have identified deficiencies in safety culture as the underlying cause of the disasters. For example:

- Zeebrugge – lack of senior manager appreciation of the importance of safety, profit prioritised over safety and poorly implemented management systems.
- Piper Alpha – Lack of management commitment, poor work practices, and profits prioritised over safety.
- Chernobyl – Nuclear power – violation of rules and procedures and overriding of safety systems.
- Clapham Junction – Poor working practices, high workload and a lack of management oversight.
- Space Shuttle - production pressures led to dangers being ignored.

Cultural and behavioural approaches are most effective when the technical and system aspects are performing but one of the keys to a successful safety culture is to get management on board so OSH professionals need to strategically position themselves within the organisation so that they are seen as people who add value to the business, not just costs. Leadership and behaviours are two fundamental areas to focus on in driving improvements in safety but real progress on health and safety only starts once it is seen to be just as important as other business elements, such as cost and delivery.

Life Savings

It's sometimes difficult for an OSH practitioner to make the business case for health and safety. IOSH recently launched a campaign called "Life Savings", which aimed to help businesses with the financial case for health and safety. Leaflets designed as bank notes caught the imagination of OSH practitioners and those they distributed them to. Each "bank note" contained information about cost savings and links to good practice. Other web tools such as accident cost calculators are useful to help the OSH practitioner work out the actual cost of an accident or absence due to work related ill health.

Small and medium enterprises (SMEs) are less likely to measure the cost of accidents. But research commissioned by the HSE (Antonelli et al (2006)) found that the six companies they studied in depth found that improving health and safety was essential for business risk management. They recognised the risk to their businesses and wanted to safeguard their reputations as well as reduce absence rates. Sometimes they were driven by requirements of their

customers and the need to try and the need to control insurance costs as well. These are factors that any OSH practitioner can think about when planning how to make the business case.

But it's not just about safety, OSH practitioners also need to be able to make the business case for workplace health and be able to identify workplace health priorities at an early stage. They will need to develop presentation and project management skills, including mediation and conflict management and develop a general understanding of business models and processes so that they can integrate OSH into decision making.

Wellbeing

OSH practitioners are often in an ideal position to be able to notice the first signs of occupational illness and alert managers so that early intervention can be planned. However there is a need to expand their role into new skill areas and add to their knowledge so that they can provide support to others helping with rehabilitation.

In 2008, following Dame Carol Black's publication of her review of the health of Britain's working population, IOSH piloted a new programme to help safety and health practitioners play a more active role in the management and promotion of health in their workplaces. (Grainger and Joyce 2011). OSH professionals are often more comfortable with environmental solutions but sometimes work adaptations will need to be more than physical ones. Leka et al (2008) listed the key knowledge areas, which would be important for OSH professionals to develop in order to deal with the health agenda. These included:

- Health surveillance and identification of emerging risks
- Musculoskeletal disorders
- Sickness absence
- Planning for major health-related scares and incidents
- Work-related driving
- Work-life balance

Musculoskeletal and psycho social disorders are often closely related to the way work processes are designed and employees treated within an organisation. So this emphasises again the need for the OSH practitioner to make sure they are communicating with decision makers and promoting a good health and safety culture throughout the organisation.

Reputation

Research has highlighted that law and business reputation are both key factors in persuading organisations to be proactive in their health and safety management (Wright 1998). The problem in the UK is that enforcement levels are fairly low. In Great Britain, in 2011/12, only 680 cases were prosecuted for health and safety breaches although these cases resulted in total fines of £16.9 million and under new rules to be introduced in April 2013 to reduce bureaucracy, checks will no longer be routinely carried out on premises considered to be low risk, like shops.

More recently, the introduction of the Corporate Manslaughter and Corporate Homicide Act (2007) has provided an opportunity for OSH professionals to engage Board Directors and senior managers in a discussion about their health and safety practices. The Act provides an opportunity to focus directors on the need to provide leadership and adequate management to

ensure the safety and health of their employees and others. Large organisations, keen to ensure that they are not exposed to risk via their supply chains, may also seek further assurance about the adequacy of the management systems and cultures of their suppliers, thus helping to drive up standards more widely. So it is also possible for OSH professionals to promote health and safety indirectly, for example, by working in partnership with employees involved in procurement (Walters and James (2009)).

A priority for many organisations now is Corporate Social responsibility (CSR). This involves going beyond legal compliance and being seen as acting responsibly towards people, planet and profit. It is important because the ethical investment market is growing and as such social performance is influencing these investment decisions. A company's reputation in social and environment areas can influence customers and potential employees. CSR has implications for OSH because it involves embedding an exemplary health and safety culture not just focussing on bare legal requirements for employees' health and safety.

Therefore linking health and safety to arguments and evidence about how it can improve an organisation's reputation can also be helpful to OSH practitioners.

Conclusion

This paper has discussed how OSH professionals can influence management to focus on health and safety and the skills they might need to learn to do so. It has covered the need to make functional alliances, to learn the right influencing style and to communicate in multi directional ways to suit different audiences. The important role of the transformational leader was highlighted in the improvement of safety culture, so that safety becomes a value not just a priority. Other areas, where the OSH practitioner can influence, such as the wellbeing agenda and in maintaining the organisation's reputation were highlighted.

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