

Findings and recommended actions to improve health and safety governance in Aotearoa New Zealand

SUMMARY

The **Better Governance**
Report Series

Introduction to the *Better Governance* project

The health, safety and wellbeing of kaimahi (workers) is both an ethical and legal responsibility for those who govern and lead businesses and organisations in Aotearoa New Zealand. This includes those governing and leading organisations from overseas, for example, in the case of multinationals.

We know that health and safety are generally on the agenda for boards, officers and leaders. We also know that our performance against some measures has stalled. In some cases, our performance is getting worse. Kaimahi are still being killed and seriously harmed while whakamahi (working) in Aotearoa. The agenda is not driving the necessary change towards positive outcomes.

Mahi Haumarū Aotearoa – WorkSafe New Zealand (WorkSafe) has publicly signalled an intention to increase its focus on boards, officers and other leaders supporting healthy and safe mahi (work) under the *Health and Safety at Work Act 2015* (HSWA). This provides the opportunity for officers and leaders to improve health and safety governance culture, competency and consistency of practice.

Over the past five years, an average of **77 kaimahi** have been killed each year while working¹

Injuries resulting in **more than a week away from work** have risen every year over the past ten years, except in 2020

There are an estimated **5,000–6,000** hospitalisations each year due to work-related ill-health

Health and safety governance has a critical and crucial role in improving outcomes for organisations and their kaimahi

The *Better Governance* project (the project) was initiated in the context of Aotearoa's flatlining and deteriorating performance, and the renewed focus of WorkSafe on leaders. And, because governance is an area of opportunity identified by a number of health and safety leadership organisations and professionals, following the path set out by the *Royal Commission into the Pike River Mine Tragedy* and the *Independent Taskforce on Workplace Health and Safety* (the Independent Taskforce).

The project is being led by the *Business Leaders' Health and Safety Forum* (BLHSF) and the General Manager Safety Forum (GM Safety Forum). It has support from the *Institute of Directors* (IoD) and from WorkSafe, along with a wide range of stakeholders.

¹ All health and safety-related statistics referenced in this report are from WorkSafe unless otherwise noted, and are subject to the data limitations noted at <https://data.worksafe.govt.nz/>

WorkSafe funding has enabled this phase, ***phase one: discovery and options identification***. The funding provided for the project team, acting in a strategic and advisory capacity drawing from our subject matter expertise and experience. It also provided for a part-time project team member to support the project.

As a result of phase one, the project team have already shared two legacy reports with over 1,000 stakeholders. This includes with ministers and members of parliament, policy makers, operational agencies and teams, regulators, those working in a wide range of governance sectors and in businesses and organisations throughout the motu, along with *Te Kauae Kaimahi – the New Zealand Council of Trade Unions*.

The team have now developed a suite of recommended actions to improve health and safety governance, and outcomes, in Aotearoa. They are summarised in this document and detailed our final report, which concludes phase one and the current dedicated funding for the project.

The project team believes that ***phase two*** of the project – to implement our recommendations – is necessary so that the work to-date translates into action for positive change. There is goodwill towards the project and the work, and there is momentum that we need to harness. ***Phase three: monitoring and evaluation*** should follow in order for success to be measured and adjustments made.

We invite all of you to continue to advocate for the importance of improving health and safety governance, and to take action to improve governance and leadership in your organisations and sector. The project team knows that taking action to make improvements is important to many. This is because the project has benefited from the contribution of many stakeholders and *subject matter experts* (SMEs). We would like to whakamihi (acknowledge) everyone who has contributed to date, and say tēnā koe (thank you).

The team, and our resources, for this phase of the project were small. But, we had a big ambition and a clear project vision that remains true as we conclude this phase. It was focused on directors and officers, their discussions and questions about health and safety, and the decisions they make drawing from diverse, reliable and credible insights and advice. It is that:

Governance leadership genuinely improves health and safety performance in Aotearoa

The project team:



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Background to this report

To start the project, a stakeholder engagement and discovery exercise was undertaken. This was to better understand how governance was done in Aotearoa, and to hear about the opportunities and challenges confronting health and safety governance from a range of stakeholders. The project team also wanted to understand:

- where officers and leaders were getting their health and safety governance advice
- the health and safety governance information and guidance material that was available
- what was influencing officers and leaders in their governance discussions and decisions
- if there was any evidence connecting good governance with better health and safety outcomes.

We produced a *Stakeholder Engagement* report. In it, we identified that most stakeholders agreed action to make improvements in health and safety governance, and governance generally, was needed. We also identified a compliance-focused approach to health and safety governance.

Health and safety governance has not been the catalyst for system and performance change that was anticipated with the creation of a legal duty in the HSWA



A challenge to health and safety governance that was consistently raised with the team was the increasingly complex environment in which officers and leaders govern. Stakeholders also noted the challenge of lifting the governance performance across the diverse range of governance sectors.

Our *Health and safety governance advisors, advice and other influences report* sets out the detailed findings from our discovery exercise. We found that:

- officers and leaders may seek advice from a wide range of people and organisations, some of whom provide general advice, some health and safety-specific advice
- there's a wealth of publicly available governance materials but very little work-related health and safety governance material adding value
- influences and concerns include legislation and case law, COVID-19, mental health and wellbeing, the environmental, social and governance (ESG) agenda, social licence and the media.

We reviewed over 200 governance materials, including:

| | | | |
|-----------------------------|-----------------------------|---------------------------------------|--|
| information and guidance | templates and checklists | questions and answers documents | training course outlines and workbooks |
|-----------------------------|-----------------------------|---------------------------------------|--|

Stakeholder generally accepted that good health and safety governance can support good outcomes for organisations and their kaimahi, and that of their partners. They confirmed the view of the *Independent Taskforce* which saw a clear role for those in governance enabling healthy and safe mahi.² There is also evidence that boards and officers influence health and safety outcomes in their organisations. The most powerful evidence is, sadly, catastrophic events and inquiries into them. The Pike River Mine tragedy is an example.

We found evidence of the value of integrating health and safety into organisational strategy and purpose, not seeing it as a transactional or compliance activity, and understanding it as a long-term commitment. There were references to the benefits of caring for kaimahi, valuing them, seeing them as an asset, and ensuring worker participation in health and safety. The need to collaborate across an organisation, and be open and transparent about health and safety risks and harms was referenced.

² <http://hstaskforce.govt.nz/documents/report-of-the-independent-taskforce-on-workplace-health-safety.pdf>

The opportunity to redefine health and safety, and health and safety governance

Redefining health and safety as an outcome

The project team considers that there is an opportunity to clearly define, and for some redefine, “health and safety”. This is so Aotearoa can share a view on these things that we want officers and leaders to govern and lead for; we want business and organisations to manage and deliver; and we want our kaimahi, their family and whānau, and our communities to be.

Health and safety are positive outcomes of work going well

If Aotearoa understands health and safety as positive outcomes of work going well, in both expected and unexpected situations, we can then ask how best to achieve those outcomes for our organisations and kaimahi. The *Independent Taskforce* noted that officers have power, influence and resources, and described the need for their leadership as “vital”.³

Leadership is about having a vision, and setting out a strategy that supports an organisation and its kaimahi to work towards achieving it

Redefining health and safety governance through a shared vision and principles to guide action

The need to have a vision, and a strategy that flows from it, is widely accepted as important for business and organisations to succeed. Strategy and purpose are one of the IoD’s *Four Pillars of Governance Best Practice*.⁴ We have prepared a draft vision and set of principles for health and safety governance. They are koha (an offering) from the project team.

³ <http://hstaskforce.govt.nz/documents/report-of-the-independent-taskforce-on-workplace-health-safety.pdf>

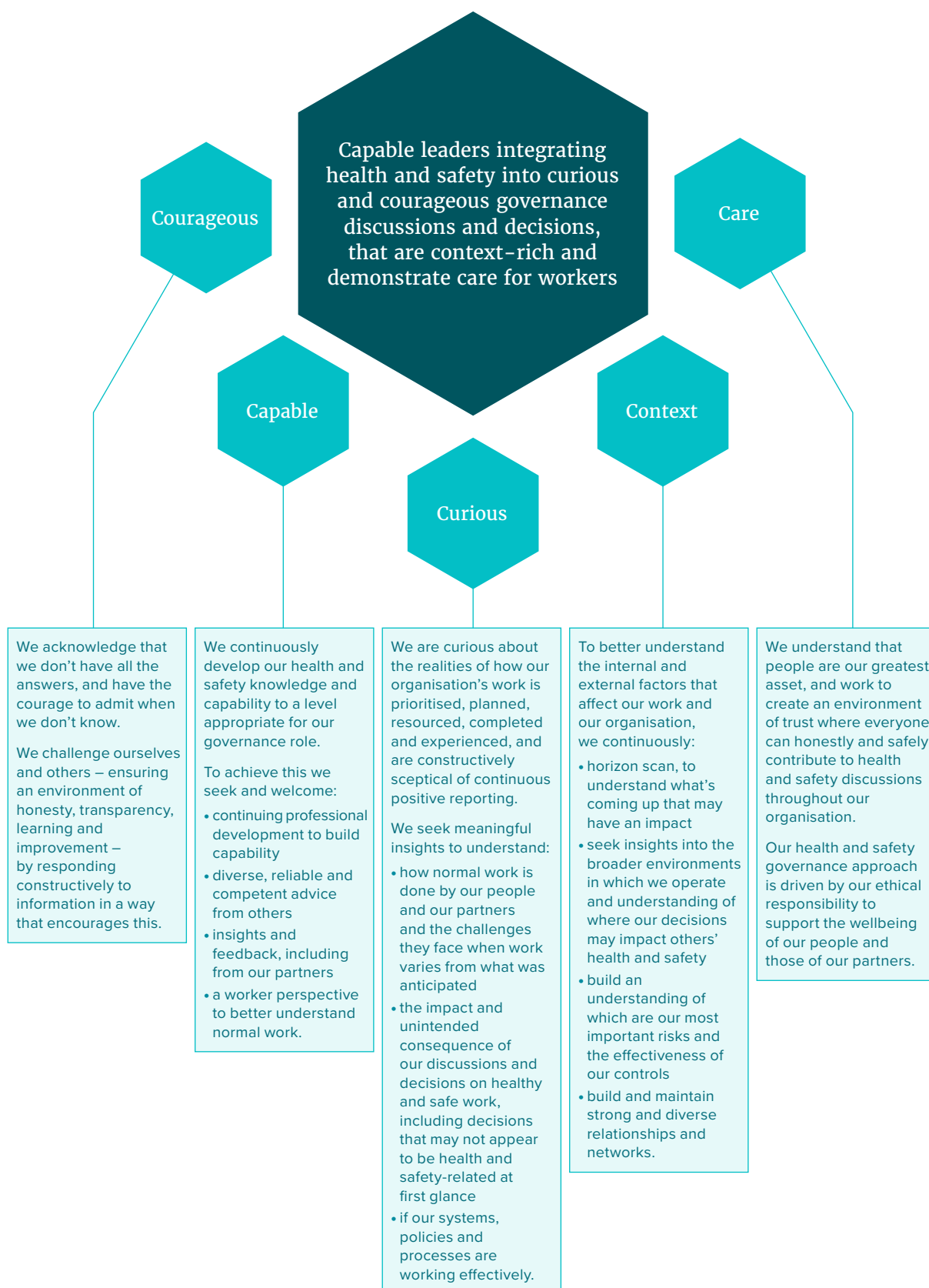
⁴ <https://www.iod.org.nz/resources-and-insights/4-pillars-landing-page/#>

What is governance?

There is no one single activity that defines “governance”. It is the system through which organisations are directed and controlled. It includes strategic planning, vision and purpose-setting, and risk and performance management and assurance.



Our vision for health and safety governance



Summary of our principles for health and safety governance

Our principles for health and safety governance complement our vision. They are a place to begin in doing the necessary work to build a picture of what health and safety governance should look like. We would like to see further work done in the next phase of the project to align them with uara and tikanga Māori (Māori values and principles).

| | |
|----------------------------------|--|
| Learn and develop | We recognise that ongoing learning and development is vital and a requirement of our role |
| Anticipate and understand | We anticipate the impacts of change, and understand that a range of different scenarios may occur from it |
| Plan and resource | We plan for dynamic, messy work, and recognise that positive health and safety outcomes require people and resources to cope with that complexity |
| Trust and verify | We trust our people and partners to give advice and implement the decisions we make; we verify that those things happen, and that our critical systems and controls work |
| Monitor and respond | We monitor our work, seeking and welcoming genuine insights into our risks, and respond in a way that encourages honesty and transparency |

Better understanding how governance can address inequitable outcomes

As part of this discovery phase, the project team identified the need for further korero (discussion) and whakaaro (consideration) about how better health and safety governance can help address inequitable outcomes for Māori and non-European kaimahi. We see the need to share a better understanding of the fact that inequities for Māori and other non-European kaimahi are *not* just because they are working in higher-risk sectors or industries, or higher risk jobs, although this is a significant issue.

We acknowledge that this kōrero can be challenging and will require a commitment to building further cultural understanding and competency in our officers and leaders. We also know engaging in the kōrero will provide boards, officers and leaders with a significant opportunity.

If we can govern and lead to address inequities in outcomes for non-European kaimahi, we will significantly improve outcomes for all of Aotearoa. If we cannot, we will struggle to achieve the performance improvements we want and need.

We need to break out of the status quo and stop saying “this is the way we have always done it” – what we’re doing now isn’t enough



Between 2013 and 2019 outcomes for Māori got worse with an increase in both acute injuries, and acute injuries with a week or more away from work⁵

55%

The rate of acute injury with a week or more away from work for Māori has been, on average, 55% higher than the rate for non-Māori⁶

15%

The Māori rate of acute injury with a week or more away from work has increased by 15% in the past six years; in the same period the non-Māori rate increased by 8%⁷

⁵ <https://www.worksafe.govt.nz/dmsdocument/46468-maruiti-2027-safe-haven/latest>

⁶ Ibid

⁷ Ibid

Our initial recommendations for action and change

Our vision and principles for health and safety governance are about foundation-building. Building upon those pou (pillars), our initial recommended actions are summarised below. They are focused on:

- understanding and adapting to the **context** in which health and safety governance is done in Aotearoa, by officers and leaders in different governance sectors and prioritising future work
- ensuring **clarity** of obligations and what good practice can look like in different sectors, and of the expectations and intervention approach of the regulators
- building **capability** and **diversity** in officers and leaders, and those advising health and safety governance, so they can better support organisations and kaimahi to thrive
- **monitoring what matters** to shift the compliance focus to a focus on critical and strategic risk, and to assuring critical controls and systems are in place and working as intended.

In making our recommendations have not sought to replicate our earlier reports. They are our:

- *Stakeholder Engagement report*
- *Health and Safety Governance Advisors, Advice and Influences report.*

We have made suggestions about the stakeholders that might be party to delivering an action. We recognised that some stakeholders will not have the resources available to make an ongoing commitment to this work without support.

We acknowledge that to some stakeholders the project team's recommended actions may not be as ambitious as they might have wanted. Their foundational focus created a tension with our desire to contribute more and recommend more. But, they recognise the diversity of the governance sectors, and the range of health and safety governance maturity, we have identified. They are a place to begin, and we believe that with ongoing goodwill and momentum, we **can** do more and the team's vision **is** achievable.

I orea te tuatara ka puta ki waho

The need for a focus on health and safety is constant

What we recommend

| Our recommended action(s) | Priority | Key stakeholders |
|--|----------|--|
| Context | | |
| <p>1. Establish and fund a health and safety governance reference group to:</p> <ul style="list-style-type: none"> represent the key stakeholders that should be engaged in the next phase of the project support the development and delivery of the recommended actions provide advice on the sectors that should be prioritised as targets for intervention. | High | <p>Regulators</p> <p>Governance organisations</p> <p>Sector organisations</p> <p>H&S sector organisations</p> <p>Practitioner representatives</p> <p>Worker representatives</p> <p>Hāpu and Iwi representatives</p> <p>Ethnic sector representatives</p> |
| <p>Rationale: An overarching reference group can help ensure there is diversity and representation from a range of sectors supporting the next phase of the project. The group can help build an understanding of the different sectors, and support the development and implementation of the recommended actions so that they are fit for purpose.</p> | | |
| <p>2. Develop and share a set of governance sector-specific “personas” that:</p> <ul style="list-style-type: none"> identify the key features of each sector and the way their governance is generally done can be used to develop specific examples to support the vision and principles can enable communications, information and other actions for change to be better targeted. | High | <p>Regulators</p> <p>Governance organisations</p> <p>Sector organisations</p> <p>H&S sector organisations</p> <p>Practitioner representatives</p> <p>Worker representatives</p> <p>Hāpu and Iwi representatives</p> <p>Ethnic sector representatives</p> |
| <p>Rationale: High-level personas – such as a professional director on the board of a publicly listed company, an owner-operator of a family business, a volunteer not-for-profit board member – will provide a start from which further detailed and nuanced personas could follow in the future. It will help with the development and implementation of our recommended actions, and the regulators to build an understanding of governance practice in the different sectors.</p> | | |

| Our recommended action(s) | Priority | Key stakeholders |
|--|----------|---|
| Context | | |
| 3. Use the personas, the knowledge gained in developing them, and risk and harm data and insights to identify target sectors for which the delivery and implementation of the recommended actions should be prioritised. | High | Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| Rationale: There will need to be some prioritisation of our recommended actions, and we provide our views on this in the “priority” column and next section of this report, <i>Implementing the recommended actions</i> . Prioritisation decisions should be made considering risk and harm data and insights, and the influence a particular governance sector might have. | | |
| Clarity | | |
| 4. Develop and communicate detailed guidance , with reference to the sector “personas”, about who comprises an officer , so that leaders, senior managers and others can be clear about whether they hold officer duties. | High | Health and Safety Policy Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| Rationale: The meaning of “significant influence” is context and case-specific. However, better, clearer and more detailed guidance than exists now can be developed for the various governance sectors. It does not have to identify named roles, but the activities that a person who is an officer, or with significant influence, undertakes within an organisation. | | |

| Our recommended action(s) | Priority | Key stakeholders |
|--|----------|---|
| Clarity | | |
| 5. Develop and communicate detailed guidance , with reference to the sector “personas”, about the difference between due diligence and a PCBU’s duties , so due diligence duty can be better understood and delivered. | High | Health and Safety Policy Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| Rationale: Officers who are managers and/or workers need to be clear about the different roles they play, and what HSWA duties apply to those roles. This was acknowledged as a significant challenge by many stakeholders. | | |
| 6. Develop and communicate detailed guidance , with reference to the sector “personas”, about governing PCBUs who hold shared and overlapping duties . | Medium | Health and Safety Policy Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| Rationale: The project team was surprised at how few of the governance materials we reviewed provided information or guidance on governing PCBUS with shared and overlapping duties. This is a significant gap considering few organisations and their kaimahi work in isolation. | | |

| Our recommended action(s) | Priority | Key stakeholders |
|---|----------|---|
| Clarity | | |
| 7. Develop and communicate detailed guidance , with reference to the sector “personas” and varying levels of maturity, about the activities and actions that support good work-related <u>health</u> governance along with good <u>safety</u> governance so that key features of each are understood. | Medium | Health and Safety Policy Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| Rationale: Officers need guidance on the activities and actions that support good work-related health governance along with good safety governance. There needs to be more than lists of questions or checklists in the guidance materials. There needs to be sector-based examples of what a good answer would look like. | | |
| 8. Undertake a further, detailed review of the publicly available health and safety governance material to encourage the removal or correction of outdated or inaccurate materials, and reduce the overall number of materials. | High | Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| Rationale: Although it is not possible to control who produces information, there needs to be <i>trusted</i> and <i>authoritative</i> sources of information and guidance to support a range of governance sectors and maturities. The regulators, and the main governance organisations, should be the primary sources of freely available, foundational health and safety governance advice. They should further review the information available to give effect to this; encouraging out of date, incomplete or inaccurate information to be removed. | | |

| Our recommended action(s) | Priority | Key stakeholders |
|--|----------|--------------------------|
| Clarity | | |
| <p>9. Develop, communicate and implement a regulatory intervention approach to give officers clarity about the expectations of them in fulfilling their duties, and to enable those who fail to fulfil their duties to be held to account.</p> <p>There is a need for the regulators (to work together) to clarify their:</p> <ul style="list-style-type: none"> • position on and expectations of officers • intervention approach covering: <ul style="list-style-type: none"> – engagement and education – investigations – sanctions – prosecutions. | High | Regulators |
| <p>Rationale: We heard that the regulators have not set a clear baseline of expected officer behaviours and actions, and that there is limited use of sanctions. This is not fair to those boards, officers and leaders who are fulfilling their duties where others are not. The current WorkSafe position statement is not enough and no position statement has been articulated by the CAA or Maritime NZ.⁸</p> | | |
| <p>10. Develop and deliver a multi-modal, multi-channel communication and education campaign, with reference to the sector “personas”, to inform officers and leaders of their HSWA obligations and the competencies and activities required to deliver them.</p> | Lower | Regulators, with support |
| <p>Rationale: There needs to be a sustained effort to build awareness of the officer duties in the HSWA, what they require of officers and leaders, and the competencies required to deliver them. The regulators should lead this work with support from all stakeholders.</p> | | |

⁸ <https://www.worksafe.govt.nz/laws-and-regulations/operational-policy-framework/worksafe-positions/officers-due-diligence>

| Our recommended action(s) | Priority | Key stakeholders |
|--|----------|---|
| Capability and diversity | | |
| <p>11. Develop and communicate, with reference to the sector “personas”, a health and safety governance competency framework for officers and leaders, with a complementary:</p> <ul style="list-style-type: none"> recruitment pack with job description criteria and interview questions induction pack speaking to the due diligence duty and the organisation’s risk management approach performance plan framework and assessment criteria. | Medium | Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| <p>Rationale: The development of a competency framework will support lifting the capability of new officers, and those lower levels of experience and / or maturity. It may encourage a wider range of people to apply for governance roles by clarifying the skills and competencies needed. It will enable those with existing experience and skills to grow in their roles as officers and leaders. A continuing and continuous learning approach will enable Aotearoa’s leaders to access innovations, and be informed of new and emerging leading governance practice.</p> | | |
| <p>12. Develop and communicate, with reference to the sector “personas”, a health and safety governance meeting pack, with:</p> <ul style="list-style-type: none"> annual plans for structured health and safety deep dives example board or management paper templates considering health and safety example questions (and answers) for curious governance discussions. | Lower | Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| <p>Rationale: We don’t want boards, officers and leaders to take a templated approach to health and safety. But we recognise that people and organisations can benefit from having a place to begin, to escalate health and safety, and integrate it into their governance discussions and decisions.</p> | | |

| Our recommended action(s) | Priority | Key stakeholders |
|---|----------|---|
| Capability and diversity | | |
| 13. Support the New Zealand Institute of Safety Management's (the NZISM's) programme of work to develop and implement a health and safety governance competency framework and professional registration mark for health and safety practitioners. | Medium | Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| Rationale: The NZISM is developing a new governance initiative to support health and safety professionals build their skills and competencies. This work should be actively supported so that there is alignment in the approach for officers, practitioners and the regulators. | | |
| 14. Implement a health and safety governance team within WorkSafe, supporting the regulators, with a complementary: <ul style="list-style-type: none"> recruitment pack with job description criteria and interview questions performance plan framework and assessment criteria work programme aligned to the intervention strategy. | High | Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| Rationale: In order to deliver a health and safety governance intervention strategy, the regulators need executive ownership and dedicated capability and resources. They need people who can effectively engage with, educate and investigate boards and officers. The skills and competencies needed a unique. | | |

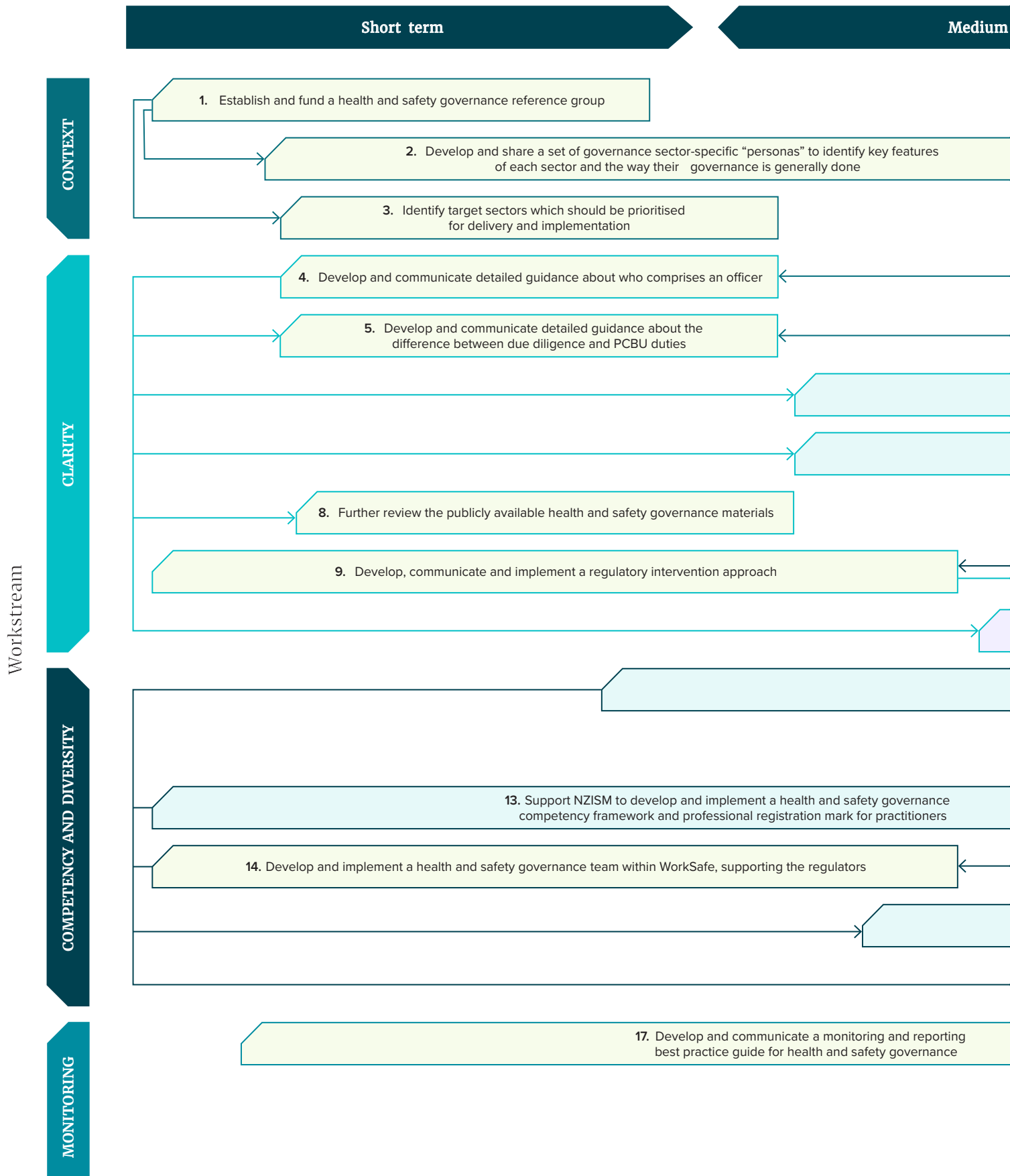
| Our recommended action(s) | Priority | Key stakeholders |
|---|----------|---|
| Capability and diversity | | |
| <p>15. Develop and fund a training and continuing professional development programme for health and safety governance including recommended:</p> <ul style="list-style-type: none"> • information and guidance • reading materials • training and development programmes • networking and learning opportunities. | Medium | Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| <p>Rationale: There are health and safety governance training programmes available for officers, leaders, practitioners and others looking to develop their skills and capabilities; however, they come with a cost and can be very expensive. They need to be complemented by freely accessible, clear and authoritative guidance materials, reading lists, and fee or funded training opportunities.</p> | | |
| <p>16. Develop, implement and fund a health and safety governance mentoring programme for officers, leaders, practitioners and others looking to develop their skill and competencies.</p> | Lower | Regulators Governance organisations Sector organisations H&S sector organisations Practitioner representatives Worker representatives Hāpu and Iwi representatives Ethnic sector representatives |
| <p>Rationale: The mentoring programmes we heard about (rightly) target specific population groups. The good work being done through these programmes could be an example for developing health and safety governance networking programmes that are accessible to all officers, leaders and health and safety practitioners.</p> | | |

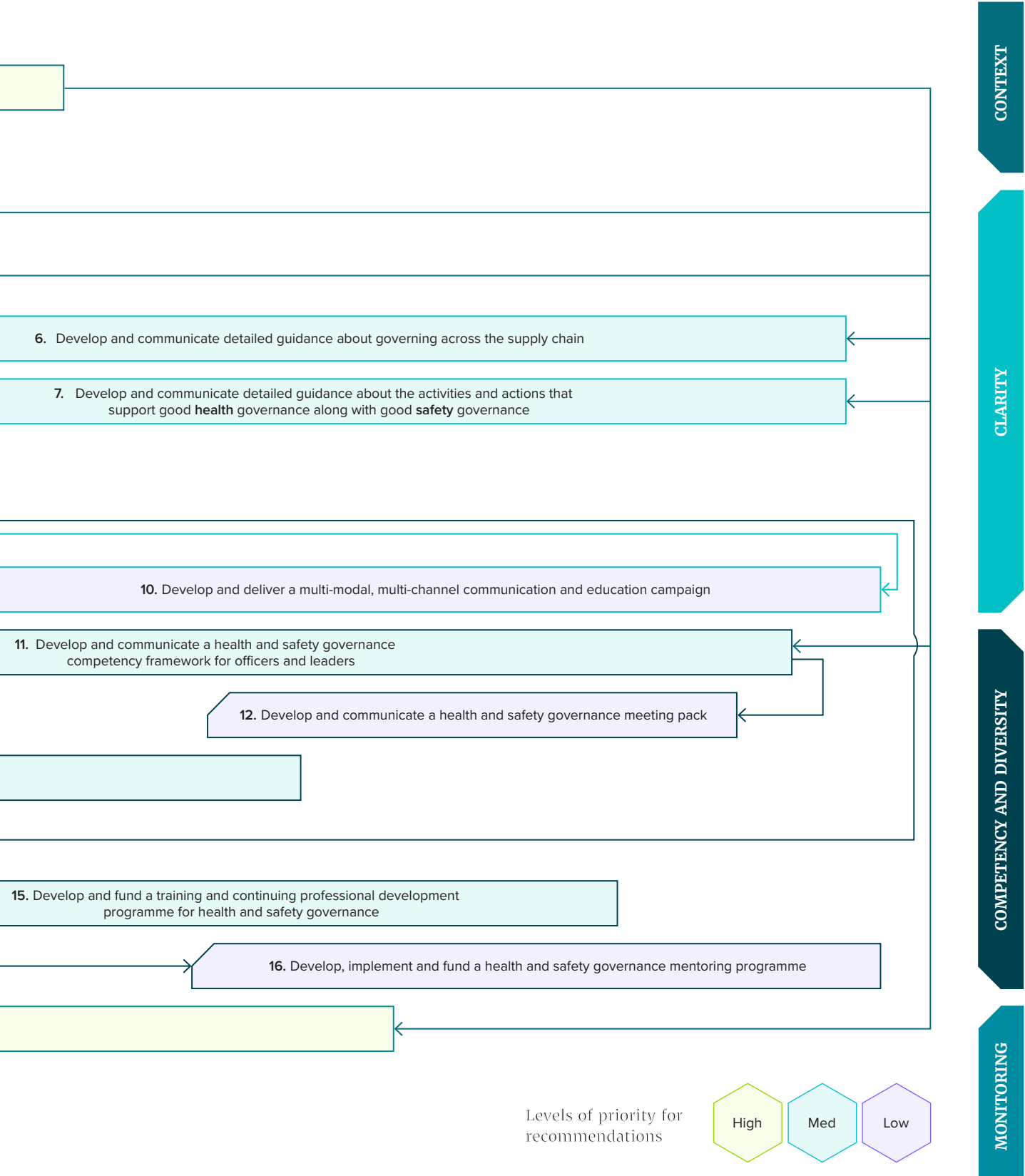
| Our recommended action(s) | Priority | Key stakeholders |
|--|----------|--|
| Monitoring | | |
| <p>17. Develop and communicate, with reference to the sector “personas”, a monitoring and reporting best practice guide for health and safety governance including measures and insight supporting effective:</p> <ul style="list-style-type: none"> • health and safety system, policies and processes performance • governance practice so that officers and leaders can reflect on their own mahi. | High | <p>Regulators</p> <p>Governance organisations</p> <p>Sector organisations</p> <p>H&S sector organisations</p> <p>Practitioner representatives</p> <p>Worker representatives</p> <p>Hāpu and Iwi representatives</p> <p>Ethnic sector representatives</p> |
| <p>Rationale: Officers and leaders need more than just data. They need insights on:</p> <ul style="list-style-type: none"> • their organisation’s critical and strategic risks, and how those risks are being effectively mitigated and managed • the performance of their systems, policies and processes; are they known about, followed, successful, needing work • what additional controls might be available, and why they are not being used within their organisation or by their partners • the way normal work is done and how it varies from those systems, and why; is the variation healthy, safe innovation or is it risky. | | |

Implementing the recommended actions

The diagram below sets out a high-level starting approach toward implementation. We have tried to indicate where recommended actions directly relate to, or flow into, each other. This is not an implementation plan but a starting point on which one can be built for the next phase of the project. The recommendations in green are those which we consider the highest priority. Those in blue are the next level of priority, with those in purple to follow. The width of the boxes in which the recommendations are presented are a high-level indication of the expertise, time and resources we consider will be required to deliver a recommendation.

Figure two: proposed approach to delivering and implementing our recommended actions





Work as done – case study

Health, safety and wellbeing is an important priority for Rangitikei District Council. They want everyone to be safe at work, and get home healthy and well. Not only that, they also want their people to experience greater overall wellbeing because they work for the Council.

Like any other Board, the Elected Members of Rangitikei District Council are expected to carry out due diligence. Working together, Council's senior managers and Elected Members developed a Health, Safety and Wellbeing Due Diligence Plan aligned to the WorkSafe and IoD *Health and Safety Guide – Good Governance for Directors*.⁹ The plan provides a programme designed to support Elected Members achieve their due diligence obligations and to increase their overall health, safety and wellbeing capability, by helping them better understand the organisation's work including the risks that staff may face and the controls for these risks.

Rangitikei District Mayor, Andy Watson, notes the benefits of Elected Members and senior managers working together to ensure the safety of the Council's workforce. *"By working together collaboratively, we are ensuring that we are jointly tackling risk to the health, safety and wellbeing of our workforce. The approach taken gives governors a high level of confidence in, and increased understanding of, the information presented to us by Council officers."*

One of the key features of the Health, Safety and Wellbeing Due Diligence Plan includes 'Work as Done' sessions. While the Elected Members hear about health and safety matters in Council Chambers, the Work as Done sessions enhance understanding by offering practical demonstrations within the workplace.

Elected Member and Governance Health, Safety and Wellbeing Champion, Fi Dalgety, says that the 'Work as Done' sessions are an invaluable tool to help governance translate what they hear about in Council Chambers into real-life scenarios. *"The Work as Done sessions provide Elected Members with practical work experiences and in-the-field demonstrations. They see first-hand the critical risks our workers face and the processes we have in place to eliminate or control these risks."*

Other features of the plan include governance health and safety training, appointing a Governance Health, Safety and Wellbeing Champion, and collaboration between Elected Members and senior managers in developing Council's health, safety and wellbeing strategy, policies and frameworks.

⁹ <https://www.worksafe.govt.nz/managing-health-and-safety/businesses/guidance-for-business-leaders/>

Rangitikei District Councils Chief Executive, Peter Beggs, acknowledges that it's not the only Council doing great work in this space. *"We know other Councils around the country have also implemented initiatives to support effective health, safety and wellbeing governance. We applaud these organisations and the effort they're putting into their workers' wellbeing. We've learned a great deal from other Councils, particularly within the Manawatū-Whanganui region, and we often share tools and frameworks. We are proud of the steps we have taken to improve the health and wellbeing of our staff. We will continue to optimise our Due Diligence Plan and Work as Done sessions to ensure that health, safety and wellbeing remains at the forefront of our governors thinking and decision making."*



Elected Members and Senior Managers learning about safety controls for ride on mowers.



A demonstration of safety enhancements to control the risks experienced by Animal Control Officers.

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| Prepared by | Better Governance project team |
| Prepared for | Better Governance – Governance Group Better Governance – Stakeholders |
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