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Safety Culture Spectral Analysis

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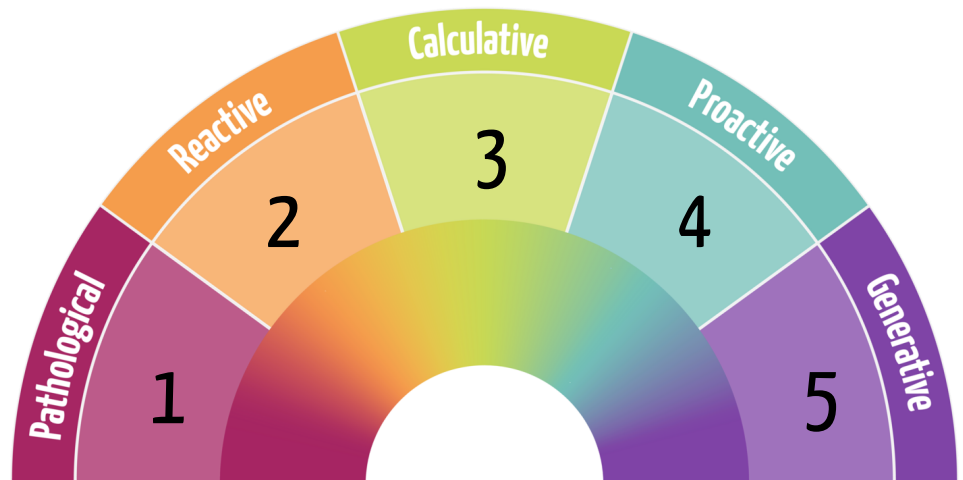
Understand your safety and health culture before you can fix it.

1

Directions: Using the spectrum below, label your organization's rating for each factor.

The spectrum is from 1-5, with 5 being the most mature. The factors to mark on the chart are:

- T (Commitment)
- I (Involvement)
- P (Process)
- M (Communication)
- Y (Competency)
- L (Leadership)



Notes

Notes

2

Directions: Using the table below, mark the score of your organization in each factor.

	1	2	3	4	5	SCORE
Commitment the proof	Seeking individual blame for mishaps.	Unreliable, inconsistent enforcement of HSE policy and procedures.	Resources and support for HSE are identified and allocated for legal compliance and conformance with internal policy and procedure.	Management values the perception of HSE as important and demonstrates commitment by prioritization of concerns, procedures and requirements & personal involvement and responsibility for safety.	HSE is a critical component of leadership hires and promotions at all levels.	
Involvement the integration	Most frontline staff are uninterested in safety and may only use safety as the basis for other arguments, such as changes in shift systems.	HSE function, roles and responsibilities are expressed in policy and procedure and expectations.	HSE function, roles and responsibilities are expressed in policy and procedure and expectations clearly communication.	Interdependence of operations and management focus on preventative initiatives.	New hire employees mention the HSE culture as a reason for applying.	
Process the systems	Unrecognizable, inconsistent, or ineffective HSE processes for effective hazards/risks, evaluation, recognition, and controls.	Conversations focus on what the workforce doing wrong or 'unsafe', rarely reinforcing positive HSE actions and outcomes.	Implemented an effective and systematic approach to managing HSE hazard/risk recognition, evaluation, and control.	Sophisticated and robust HSE management system leveraging predictive analytics influence preventative actions.	A robust HSE influenced ecosystem, interdependent, and sustainable.	
Communication the risk sharing	HSE communications are sporadic, negative, punitive, conflicting, misaligned, insensitive, irrelevant, inappropriate, absent, inconsistent, and/or reactive.	Minimally effective or inconsistent HSE communications, training, education.	Conversations about acceptable risk levels, feasibility, and sustainability of controls.	Consideration for people's behavior with respect to safety, mutual expectations and encouragement, job satisfaction & adequate equipment.	Dialogue and problem-solving meetings have structure and methods.	
Competency the abilities/knowledge	Workforce demonstrates minimal competency, struggles to identify hazards, or is misinformed.	Training completion is the measure of HSE competency.	A training matrix identifies training needs.	Prepare and implement handover of core tasks to line management.	Defined competency blueprints, rubrics, models, and matrices create an adaptive learning system.	
Leadership the how (direction/path)	HSE has no influential leadership role, function, or segregated from operations.	Minimal or underdeveloped strategies to meet legal requirements.	Managers recognize that a wide range of factors cause accidents, and the root causes often originate from management decisions.	Stakeholders are actively researching innovative strategies beyond compliance.	Executive support inspiring senior management involvement with defined HSE roles and functions implemented into the HSE management system.	

3

Directions: Using your scores from the table above, mark each factor on the cultural maturity spectrum to the right.

