



White Paper

Health and safety - state of the nation

January 2022



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2020-2021 held many challenges for organisations and not just in health and safety, but the topic does remain fundamental to responsible and successfully managed organisations and continues to form part of non-financial risk reporting.

With 2022 likely to see the questions of and around health, safety and wellbeing continue, getting your narrative right will help assure and reassure both employer and employee.

So, for our first Workplace Compliance Alert of 2022 we are reviewing the headline health and safety statistics for Great Britain in 2021 and assessing some of the trends and opportunities they highlight.

The published information we've used as the basis of this report can be found at <u>Health and</u> safety statistics 2021 (hse.gov.uk)

1. The statistics most to avoid – fatal injuries

Our return to work has seen some of the headline figures also return to pre pandemic levels - for example the 111 workplace fatal injuries that occurred in 2020 increased to 142 in 2021. The Health and Safety Executive (HSE) has seen an impact of coronavirus elsewhere, reporting:

"The coronavirus (COVID-19) pandemic has impacted health and safety statistics in 2020/21. No new data on working days lost and economic costs is available. However, two new measures have been developed to explore the impact of coronavirus on work-related ill health in 2020/21"

The rate of fatal injuries in 2020/21, while still too many, had plateaued in the decade up to the outbreak of COVID-19, after a long downward trend. In terms of the types of events causing fatal injuries, these too remain predictable with the majority being:

- Falls from height (35)
- Struck by moving vehicle (25)
- Struck by moving object (17)
- Trapped by something collapsing/overturning (14)
- Contact with moving machinery (14)

In terms of sectors, construction (39), agriculture, forestry and fishing (34), manufacturing (20) and wholesale, retail, motor, repair: accommodation and food (14), were the highest hazard.

In addition to the above 60 members of the public also sadly lost their lives in work related activities over the reference period.

Fatal injuries remain a sad and unwanted consequence of working life, however the activities that cause them in the UK are largely predictable. Understanding these in relation to your organisation and its activities (routine and one off) in combination with an effective risk management system will always help in reducing that risk.

2. The effect of non-fatal workplace injuries

Pleasingly the estimated self-reported workplace non-fatal injury workers has been on a long-term downward trend, reducing from over 4,000 per 100,000 workers in 2000/01 to under 2,000 per 100,000 workers in 2020/21.

Since the changes in regulation in 2013, RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) pre pandemic averaged over 70,000 employer reports, for 2020/21 it was 51,211 reports.

The patterns for the most common causes of reported non-fatal workplace injuries have not changed substantially over recent years, however. In 2014/15 the major types of accident involved slips and trips (28%), handling, lifting or carrying (23%), and being struck by moving objects (10%).

Pre pandemic, the figures as reported by HSE in 2018/19 were:

•	Slips, trips or falls on same level	29%
•	Handling, lifting or carrying	20%
•	Struck by moving object	10%
•	Acts of violence	8%
•	Falls from a height	8%

Remarkably the HSE figures reported for 2020/21 were very similar:

•	Slips, trips or falls on same level	33%
•	Handling, lifting or carrying	18%
•	Struck by moving object	10%
•	Acts of violence	8%
•	Falls from a height	8%

Looking at it from a slightly different perspective, worker self-reported non-fatal injury totalled 441,000 in 2020/21 according to the Labour Force Survey. This figure being further broken down to 102,000 injuries leading to over a 7-day absence and 339,000 under 7-day absence.

Non-fatal injuries at work remain a significant cause of loss in terms of the direct effect on the injured person and their colleagues, time and disruption to organisations, as well as potentially leading to HSE or local authority contact, particularly if RIDDOR reportable. Most of these events have a very predictable cause though and so recognising this must form part of your health and safety management.



3. The impact of coronavirus

The HSE have estimated that approximately 93,000 workers suffered "with COVID-19 in 2020/21 which they believe may have been from exposure to coronavirus at work (new or long-standing)."

A further 645,000 (excluding the figure above) workers suffered/ are suffering "from a work-related illness caused or made worse by the effects of the coronavirus pandemic (new or long-standing) in 2020/21."

There are several challenges and limitations in reliably producing these figures identified by HSE, which are outlined in a referenced report.

Human healthcare and social work activities were the biggest sectors affected by these statistics, contributing approx. 50% of the reported COVID-19 cases and approximately 20% of the reported work-related illnesses. Other sectors with a significantly higher reported rate of work-related illness caused or made worse by the effects of the pandemic included public administration and education.



4. What about work-related ill health?

Unlike workplace injuries the UK trend for work-related ill health has been relatively flat since the start of the century and showing increase more recently.

Similarly, where musculoskeletal disorders (MSDs) comprised the majority of reported ill health problems in 2001/02, in 2021/22 stress, depression and anxiety (50%) was the greatest cause, followed by musculoskeletal disorders (28%). This trend is also reflected in the individual topic data for each of these areas within the published statistics, with the reducing numbers for MSDs being matched by increasing figures for stress, depression and anxiety.

At 22% "other types of illness" including occupational lung disease, hearing and sight, make up the remainder of the overall work-related illness statistics. Of these in particular occupational lung disease has shown a steep rise since the 1980s but appears to have thankfully slowed over the last decade and is predicted to start decreasing in the future.

Many organisations even before the pandemic had recognised the threat of mental health, stress, depression and anxiety and were taking action. The events of the last two years have seen this accelerate further with many organisations having some form of intervention and support in place.

5. How has enforcement been affected?

With court services disrupted, as with almost all other services, the number of cases prosecuted by HSE or referred to the Crown Office and Procurator Fiscal Service for prosecution in Scotland, where a conviction was achieved in 2020/21 was 185. This is approximately half the activity seen pre pandemic (it was 364 in 2018/19), although numbers were reducing. Anecdotally the HSE has a success rate of 94% when prosecuting.

A similar trend is true for the number of enforcement notices (prohibition and improvement) issued by HSE in 2020/21 which was 2,929. As a reference in 2018/19 there were 11,040 notices issued by HSE and local authorities.

Finally fines too were affected with the £26.9 million resulting from prosecutions in 2020/21 more reflective of the pre-sentencing guideline level of fines than the approx. £80 million figure of 2017/18.



6. In summary

The visibility health, safety and wellbeing has seen over the last two years has not only been unprecedented, but it has also given the topics a status that was previously not recognised at both board and employee level for many organisations.

While COVID-19 has altered management practices, many of the issues for work-related/ workplace illness and injury are not new. The level of scrutiny they could come under in the future is likely to increase, as are the risks financially and reputationally should something go wrong.

For those who take the opportunity to invest in proactive, proportionate and effective health and safety it could mean your compliance is recognised morally and legally by stakeholders inside as well as outside the organisation. At Assurity Consulting we've been supporting organisations achieve these aims for over 35 years. How could we be helping you further?

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