

Health and Safety Executive Board Paper		HSE/07/32	
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HEALTH AND SAFETY EXECUTIVE

The HSE Board

Describing the human benefits of health and safety

A Paper by Colin Douglas

Cleared by Colin Douglas on 28 February 2007

Issue

1. This paper sets out a description of the human benefits of good management of health and safety in the workplace, the rationale for having such a description, and how it would be used.

Timing

2. For discussion at agreement at HSE Board meeting on 6 March 2007

Recommendation

3. That the Board:
 - i. supports the case for setting out a simple description of the human benefits of health and safety improvements;
 - ii. approves the wording of that description (in paragraphs 9-10) to be used on the HSE website;
 - iii. notes that this will be built into a revised set of key corporate messages.

Background

4. Health and safety is regularly criticised, in the media and elsewhere, for focusing on trivia and stopping normal, reasonable activities. HSC/E's sensible risk campaign, and Bill Callaghan's "get a life" message, is aimed at distancing ourselves from such actions and defining where health and safety should focus.

Argument

5. Communications Directorate has worked with COSAS to develop an accessible description of the reduction in harm that results from improvements in health and safety management. The description takes account of changes in the pattern of employment, and does not attribute these improvements specifically to HSC/E or

any other specific part of the health and safety system – instead the wording attributes it to ‘improvements in health and safety’.

6. The proposed wording of the statement is as follows:

Over the past thirty years, health and safety in British workplaces has improved. As a result, the lives of at least four employees are being saved and more than 300 serious injuries avoided every week. Also, every day 500 fewer workers identify ill-health problems related to work compared to 15 years ago.

7. The basis for this statement is as follows:

- i. There were 651 fatalities to employees in 1974, excluding health, education and public administration. The corresponding figure for 2005/06 is 155 (and is provisional). There are 496 fewer employee fatalities in 2005/06 compared with 1974. This reduction is equivalent to 9.5 fatalities per 7 day week (i.e. at least 9). Work by the Institute of Employment Research suggests that half of the reduction in serious injury is accounted for by a shift to lower risk sectors. Taking this result to apply to fatalities, we can assume that half of the reduction reflects the shift to lower risk sectors, leaving 4.8 to reflect improvements within sectors. Thus we can reasonably say that ‘...the lives of at least four employees are being saved...every week’.
 - ii. The furthest we can go back with reliable statistics on ‘serious’ or reportable injuries is to 1986/7, when there were 179,706 such injuries reported. In 2005/6, there were 146,076 reported. By attributing half of this 33,630 reduction to health & safety improvements, we end up with a figure of 46 injuries avoided every day (16,815 / 365) or 322 every week. Thus we can reasonably say ‘...more than 300 serious injuries avoided every week’.
 - iii. Finally, estimates of the incidence of work related ill health are available from the Labour Force Survey (LFS). Incidence in a year means cases where sufferers first recognised their illness in that year. The estimate of incidence for 2005/06 is 523,000 people. LFS data is available from 1990. Incidence was not available then but prevalence (includes cases where the ill health was recognised in previous years) is available. We can estimate incidence in 1990 from the steady relationship between incidence and prevalence since 2000. The estimate is 760,000 in 1990. Thus, there are an estimated 237,000 fewer cases in 2005/06 compared with 1990. These estimates are subject to sampling variation associated with a survey. As a result, we estimate that the reduction could vary from 187,500 to 286,500 (the 95% confidence interval). The lower figure is equivalent to 514 fewer cases per calendar day in 2005/06 compared with 1990. Thus, there are at least 500 fewer cases of ill health recognised per day in 2005/06 compared with fifteen years earlier.
8. As set out in paragraph 10 above, COSAS have adopted a cautious approach to estimating these figures. This should allow us to defend them more comfortably from critics who might want to suggest that this is an exaggeration of the reduction in harm achieved by health and safety improvements.

Consultation

9. This paper has been produced in consultation with COSAS, PEFD and CDS.

Presentation

10. If agreed by the Board, the wording set out in paragraph 9 will be put onto the statistics area of the HSE website along with the statistical basis described in 10. We circulate this to our staff and stakeholders and encourage its use in speeches, documents, presentations, press releases, etc. It is not proposed that we all parrot the exact same phrase constantly, but that we take the wording in paragraph 9 and tailor appropriately for documents and presentations.

11. Communications Directorate will be developing a wider set of corporate key messages (including the sensible risk message about 'saving lives, not stopping people living') that will be brought back to the Board for approval. They will include the message around the harm reduction achieved through improvements in health and safety.

Financial/Resource Implications for HSE

12. There are no quantifiable financial or staff resource implications attached these proposals. We are not proposing to develop new activity or channels to promote this message, but would simply encourage staff to use planned events, presentations, and communications to do so.

Action

13. Once approved, Communications Directorate will:

- arrange with COSAS and CDS for the statement to be put onto the HSE website
- circulate to staff and external stakeholders and encourage its use
- build the statement into a wider range of key corporate messages that will be brought back to the Board for approval