

Annex 1

Analysis of Responses Received to Statutory Consultation on the proposal to amend the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

Introduction

This is a summary report of the outcome of the HSE’s formal, statutory consultation on the proposal to amend regulation 3(2) of the Reporting of Injuries, Disease and Dangerous Occurrences Regulations 1995 (RIDDOR). This analysis is intended to support the HSE Board’s decision making process.

The RIDDOR consultation document, CD 233, invited responses to the specific proposal to amend the regulations put forward in the Government’s report, “Common Sense, Common Safety.” The proposal recommended extending the period after which “lost time” injury must be reported to the enforcing authority from over-three days (excluding the day on which the accident happened) to over-seven days.

The HSE’s consultation document was published on the HSE website on 31 January 2011 and lasted three months. Respondents came from a wide-range of backgrounds, the majority though were health and safety professionals in both the public and private sectors, trades unions and professional bodies and associations. Given the wide range of expertise and experience of the consultees, no weighting system has been applied to the consultations responses rather, each individual response was considered separately.

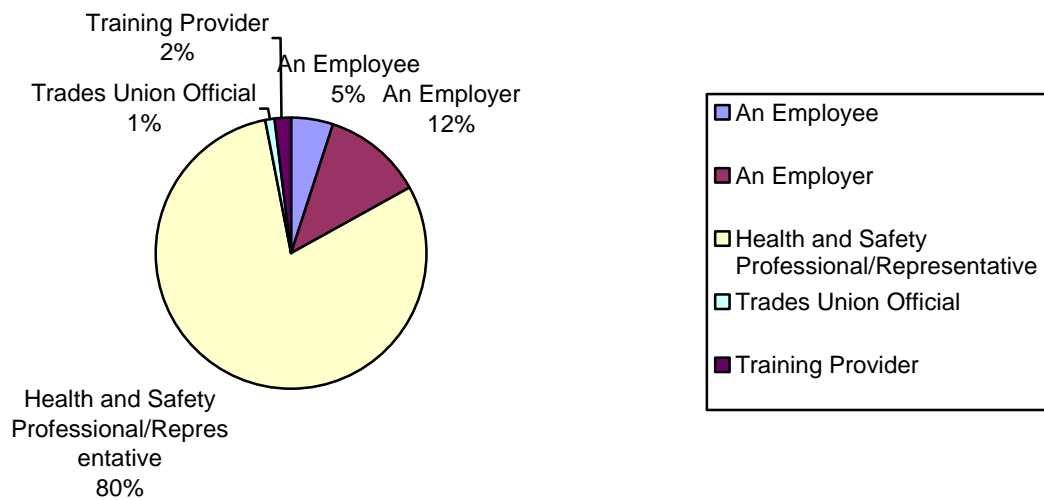
Respondents were asked to complete an on-line questionnaire or download a word document version of this and return this by e-mail or post. E-mailed responses and letters giving general comments on the proposal were also received.

There were a total of 776 responses with over 18,000 copies of the consultative document downloaded.

Responses received by capacity:

Capacity	Number	Percentage
An Employee	39	5%
An Employer	93	12%
Health and Safety Professional/Representative	620	80%
Trades Union Official	8	1%
Training Provider	15	2%
TOTAL	776	100%

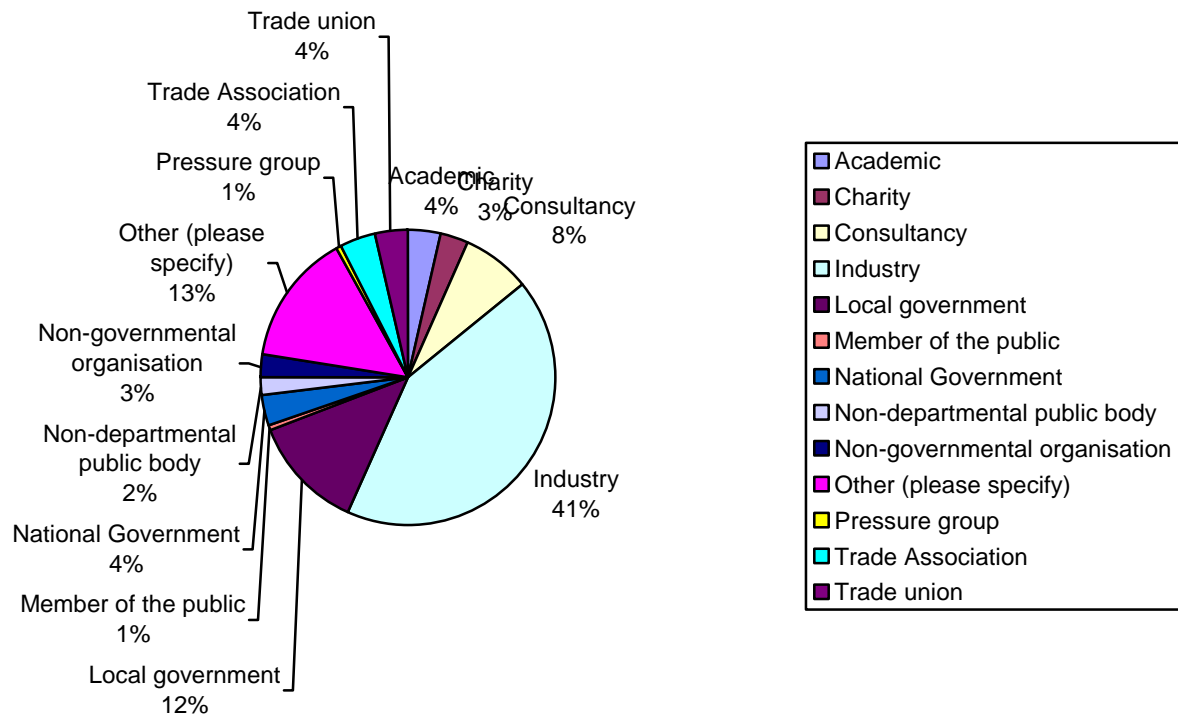
Graph 1: Responses received by Individual capacity



Responses received by Organisation Type:

What is your type of organisation?	Number	Percentage
Academic	28	3.61%
Charity	24	3.09%
Consultancy	58	7.47%
Industry	327	42.14%
Local government	95	12.24%
Member of the public	4	0.52%
National Government	27	3.48%
Non-departmental public body	14	1.80%
Non-governmental organisation	20	2.58%
Other (please specify)	111	14.30%
Pressure group	5	0.64%
Trade Association	29	3.74%
Trade union	28	3.61%
Total	776	100.00%

Pie Chart of Organisational Type



Question 1

Do you support the proposal to extend the time before an occupational accident needs to be reported from over three days to over seven?

Table 1: Showing Responses to question 1

Answer	Number	Percentage
Yes	516	66.5%
No	242	31.2%
Don't Know	18	2.3%
Total	776	100%

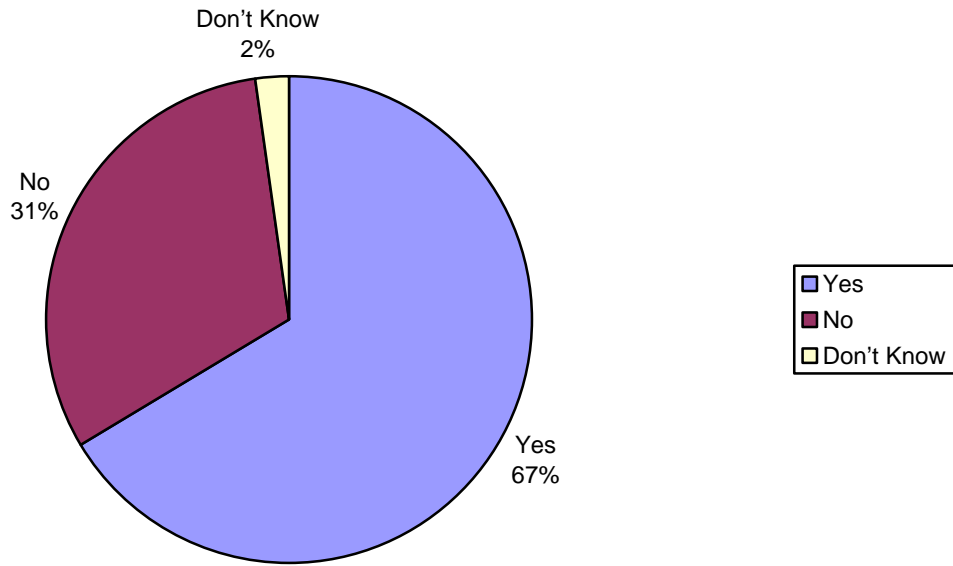


Table 2 Showing Responses to Question 1 by Organisation Type

Question 1 Do you support the proposal to extend the time before an occupational accident needs to be reported from over three days to over seven?				
What is your type of organisation:	Don't know	No	Yes	Grand Total
Academic	0.26%	1.29%	2.06%	3.61%
Charity	0.00%	0.77%	2.32%	3.09%
Consultancy	0.13%	2.19%	5.15%	7.47%
Industry	1.29%	9.02%	31.83%	42.14%
Local government	0.26%	5.03%	6.96%	12.24%
Member of the public	0.00%	0.52%	0.00%	0.52%
National government	0.00%	1.68%	1.80%	3.48%
Non-departmental public body	0.00%	0.90%	0.90%	1.80%
Non-governmental organisation	0.00%	0.52%	2.06%	2.58%
Other (please specify)	0.13%	4.38%	9.79%	14.30%
Pressure group	0.00%	0.39%	0.26%	0.64%
Trade Association	0.13%	0.64%	2.96%	3.74%
Trade union	0.00%	3.61%	0.00%	3.61%
Grand Total	2.32%	31.19%	66.49%	100.00%

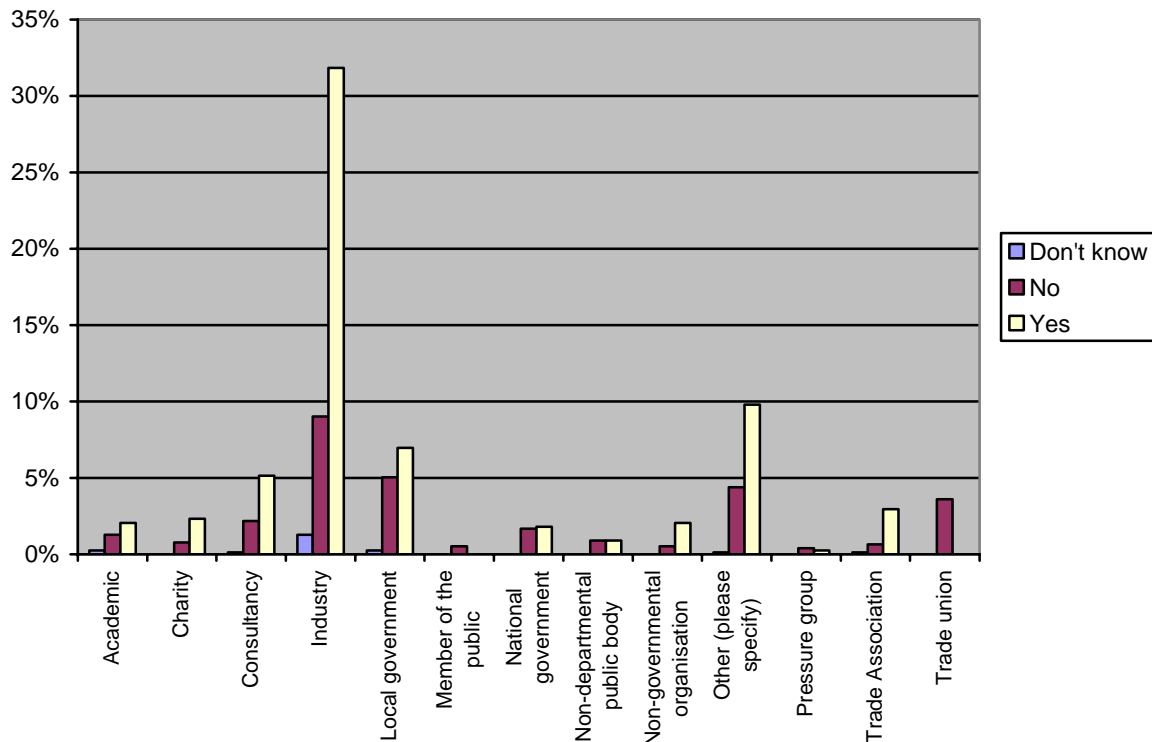


Figure 1

Organisation and Capacity

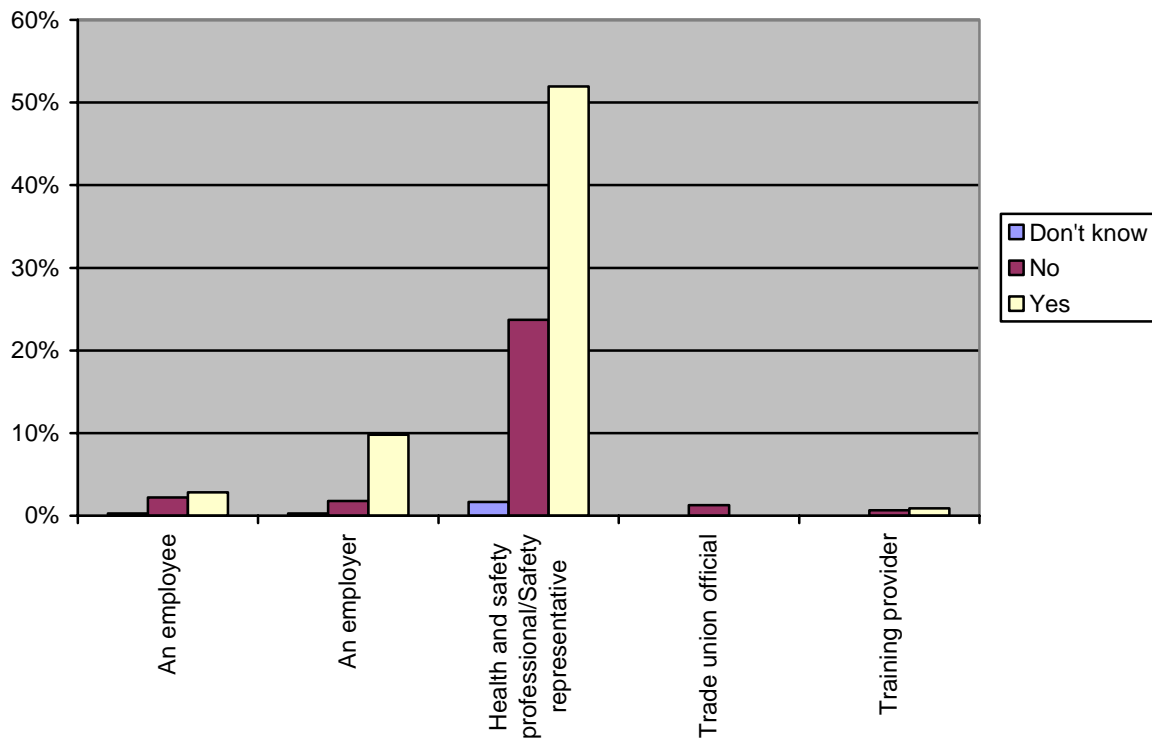
The questionnaire asked respondent to state the type of organisation they were from and in what capacity they were responding

Graph 1: Shows Overall Response by Capacity

Table 3 Showing Responses to Question 1 by Capacity

Question: 1 Do you support the proposal to extend the time before an occupational accident needs to be reported from over three to over seven days?				
In what capacity are you responding:	Don't know	No	Yes	Grand Total
An employee	0.26%	2.19%	2.84%	5.28%
An employer	0.26%	1.80%	9.79%	11.86%
Health and safety professional/Safety representative	1.68%	23.71%	51.93%	77.32%
Trade union official	0.00%	1.29%	0.00%	1.29%
Training provider	0.00%	0.64%	0.90%	1.55%
Grand Total	2.32%	31.19%	66.49%	100.00%

Showing Responses to Question 1 by Capacity



Question 2

What advantages/disadvantages will the Proposed Extension to Over Seven days make to your business?

Respondents completed free text boxes to answer this question. Analysis of the text showed key themes into which respondents have been placed.

After the initial analysis the groups were divided into those who agreed to the proposal and those who disagreed.

Advantages Suggested by Those who Agreed with the Proposal

Those who agreed with the proposal, gave one or more of the following advantages in support of their decision. (Percentage is that of the total number who agreed with the proposed change, ie 516):-

- administrative burdens would be reduced (32%),
- aligning with the “fit note” would make sickness absence easier to manage (27%);
- the medical examination would assist with rehabilitation and the management of the injured person’s return to work (17%);

- this would also remove any uncertainty where unscrupulous persons were seeking to extend the period of absence would be removed with a positive impact on the “claims culture” (7%);
- the extended period would allow more time for employers to investigate the incident internally (11%);
- uncertainty when the period of absence goes into a weekend or other rest period would be removed (10%);
- in addition, the quality of information about the injury provided in the RIDDOR report would improve (8%); and
- it would focus RIDDOR on the more serious injuries (20%).

Disadvantages Suggested by Those who Agreed with the Proposal

Those who agreed with the proposal, also stated one or more of the following disadvantages (Percentage is that of the total number in favour of change, – 516):-

- there would be a discontinuity in the statistics (7%)
- the change might send the wrong message, downgrading the importance of RIDDOR (6%);
- the decreased in frequency of reporting may lead to lower reporting levels (1.5%)
- the change may be challenged by the EU (2%);
- the costs of estimating data for the EU may negate any saving (2%);
- there would be a burden on organisations to change their systems (7%);
- the likelihood that employers would investigate O3D injuries would decrease (3%);
- workers would extend their absence to have their injury reported (4%); and
- minor injuries, eg “medium” strains and sprains would be missed (3%)

Disadvantages Suggested by Those who Did Not Agree with the Proposal

Those who did not agree with the proposal, suggested one or more of the following key themes as disadvantages. (Percentage is that of the total number who did not agree to the proposed change, ie 242):-

- There would be a negative impact on the health and safety culture of the organisation leading to a lowering of standards (17%);

- Reducing the number of reports reduces the opportunities to spot serious incidents that could have resulted in more serious injuries (24%);
- The increased period between the incident and reporting means a consequential delay in follow-up action (3%);
- Compliance with RIDDOR would decrease (31%);
- The injured person will be more pressured to return to work more quickly (4%);
- The injured person will take longer to return to work in order to obtain a RIDDOR record of the incident (4%); and
- legal constraints prevent the change (10%).

Of those who did not agree with the proposal a number did recognise that the proposal would lead to reduced burdens on those with a duty to report under RIDDOR.

Question 3: Impact Assessment

Q3/ At annex 1 of the consultation document, the Impact assessment paragraphs 13 – 38 focuses on the calculation of costs and benefits of the proposal to both businesses and local authorities. Do you agree with the assessments of costs and benefits?

An Impact Assessment (IA) is a tool used by policy makers to assess and present the likely costs and benefits (monetised as far as possible) and the associated risks of a proposal that might have an impact on the public, private or civil society.

HSE Economists prepared the IA for the RIDDOR consultation document, setting out the costs and benefits in monetary values where possible. Consultees were asked whether they agreed with the IA and if not, whether there were any additional points that should be included. IAs are subject to scrutiny by the Regulatory Policy Committee (RPC). The RPC is an independent Government advisory committee and consists of a mix of independent experts with a wide range of experience and current knowledge of business, employee and consumer issues.

Table : Showing responses to Question 3

Answer	Number	Percentage	Percentage of Total Responses Received
Yes	382	53%	49%
No*	163	23%	21%
Don't Know	172	24%	22%
Total	717	100%	92%

* Those who disagreed with the IA but did not offer any additional points that should be included are included in the “No” count.

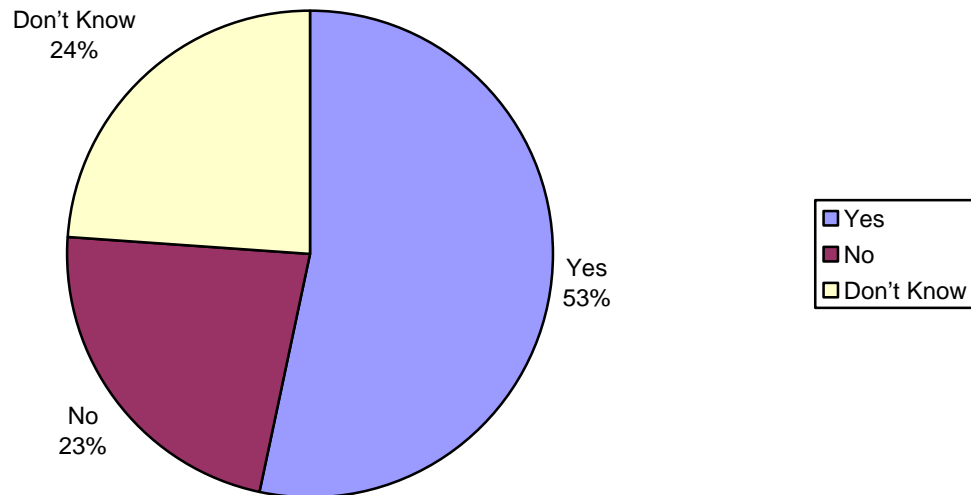
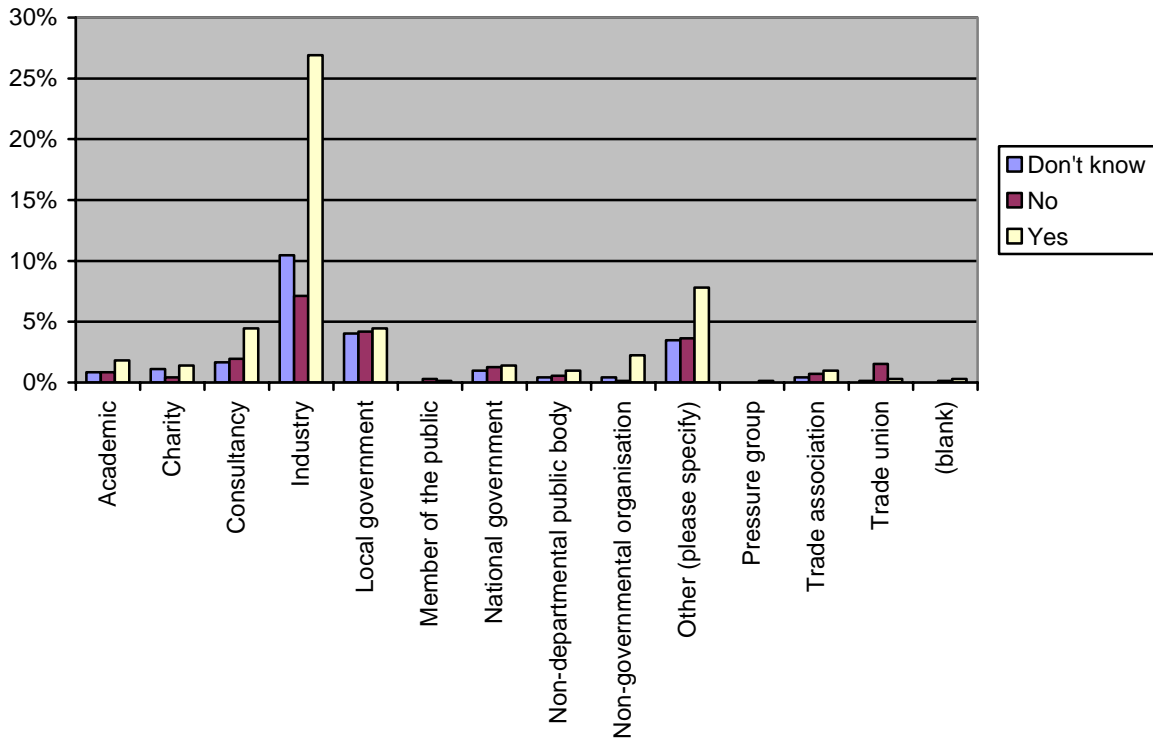
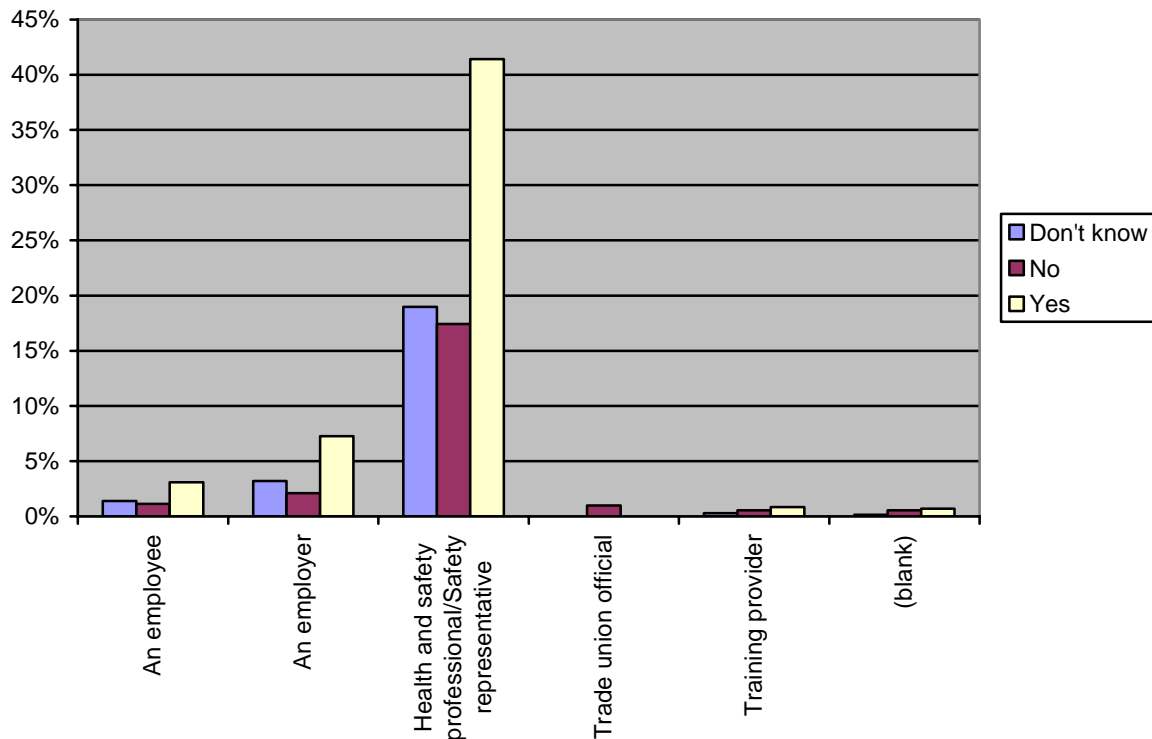


Table : Showing responses to Question 3 by Type of Organisation

Question: 3 At annex 1 of the consultation document, the Impact Assessment...				
What is your type of organisation:	Don't know	No	Yes	Grand Total
Academic	0.84%	0.84%	1.81%	3.49%
Charity	1.12%	0.42%	1.39%	2.93%
Consultancy	1.67%	1.95%	4.46%	8.09%
Industry	10.46%	7.11%	26.92%	44.49%
Local government	4.04%	4.18%	4.46%	12.69%
Member of the public	0.00%	0.28%	0.14%	0.42%
National government	0.98%	1.26%	1.39%	3.63%
Non-departmental public body	0.42%	0.56%	0.98%	1.95%
Non-governmental organisation	0.42%	0.14%	2.23%	2.79%
Other (please specify)	3.49%	3.63%	7.81%	14.92%
Pressure group	0.00%	0.00%	0.14%	0.14%
Trade association	0.42%	0.70%	0.98%	2.09%
Trade union	0.14%	1.53%	0.28%	1.95%
(blank)	0.00%	0.14%	0.28%	0.42%
Grand Total	23.99%	22.73%	53.28%	100.00%



Question: 3 At annex 1 of the consultation document, the Impact Assessment.				
In what capacity are you responding:	Don't know	No	Yes	Grand Total
An employee	1.39%	1.12%	3.07%	5.58%
An employer	3.21%	2.09%	7.25%	12.55%
Health and safety professional/Safety representative	18.97%	17.43%	41.42%	77.82%
Trade union official	0.00%	0.98%	0.00%	0.98%
Training provider	0.28%	0.56%	0.84%	1.67%
(blank)	0.14%	0.56%	0.70%	1.39%
Grand Total	23.99%	22.73%	53.28%	100.00%



Respondents were asked to identify additional items that were missing from the IA. These fell into the broad themes of:-

- the non-monetary costs of pain and suffering for those who suffered an injury;
- additional monetary costs of poor health and safety standards on businesses and society; and
- that reporting times and therefore the projected savings were over-estimated; and
- that familiarization and costs associated with changing to the new system were underestimated.

The IA has been amended to take account of these.

Question 4: Equality Impact Assessment (EIA)

Q 4/ Do you agree with the Equality Impact Assessment at Annex 2 of the consultation document?

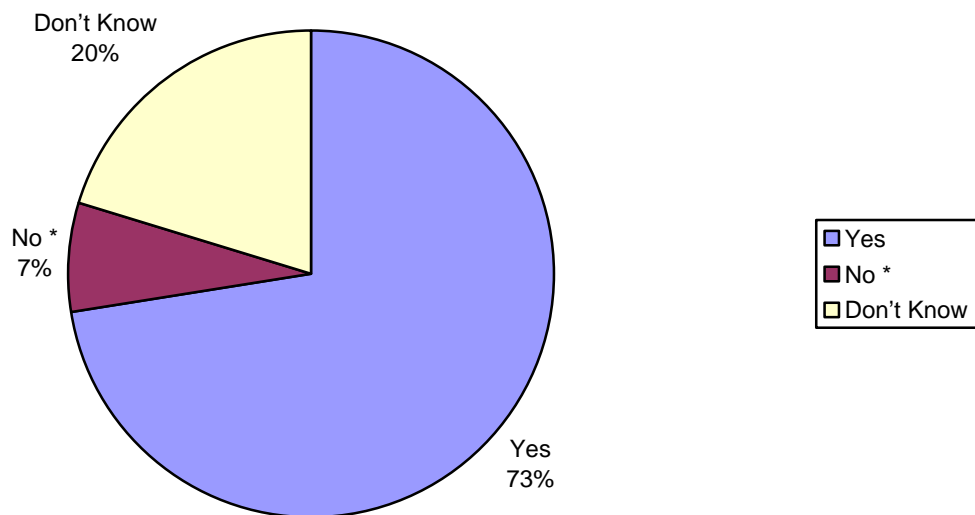
Equality impact assessments (EIAs) are required as part of the overall impact assessment. HSE published an EIA for the proposed change to RIDDOR asking consultees whether they agreed with the assessment's findings and, if not, whether there were other factors that should be taken into account.

Overall responses

Table Showing Responses to Question 4

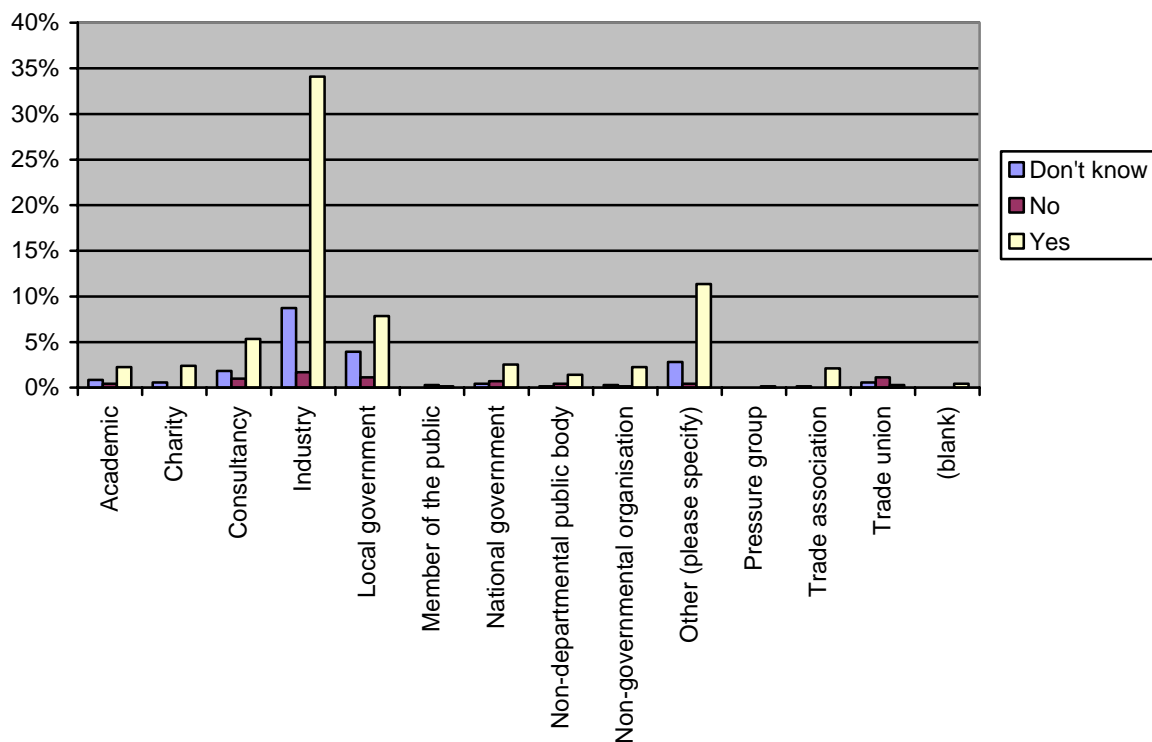
Answer	Number	Percentage	Percentage of Total Responses Received
Yes	517	73%	67%
No *	52	7%	7%
Don't Know	144	20%	18%
Total	713	100%	92%

* Those who disagreed with the EIA but did not offer any additional points that should be included are included in the "No" count.

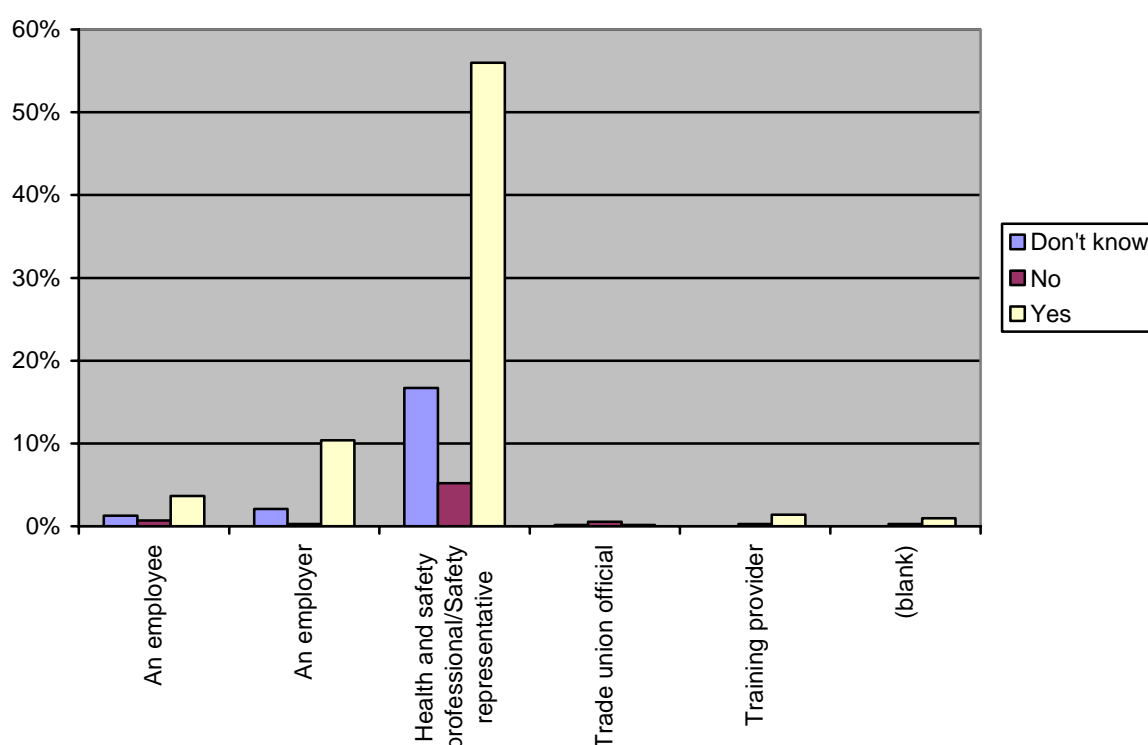


Question 4: Showing Responses to Question 4 by Organisation Type

Question: 4 Do you agree with the Equality Impact Assessment at annex 2 of ...				
What is your type of organisation:	Don't know	No	Yes	Grand Total
Academic	0.84%	0.42%	2.24%	3.51%
Charity	0.56%	0.00%	2.38%	2.95%
Consultancy	1.82%	0.98%	5.33%	8.13%
Industry	8.70%	1.68%	34.08%	44.46%
Local government	3.93%	1.12%	7.85%	12.90%
Member of the public	0.00%	0.28%	0.14%	0.42%
National government	0.42%	0.70%	2.52%	3.65%
Non-departmental public body	0.14%	0.42%	1.40%	1.96%
Non-governmental organisation	0.28%	0.14%	2.24%	2.66%
Other (please specify)	2.81%	0.42%	11.36%	14.59%
Pressure group	0.00%	0.00%	0.14%	0.14%
Trade association	0.14%	0.00%	2.10%	2.24%
Trade union	0.56%	1.12%	0.28%	1.96%
(blank)	0.00%	0.00%	0.42%	0.42%
Grand Total	20.20%	7.29%	72.51%	100.00%



Question: 4 Do you agree with the Equality Impact Assessment at annex 2 of ...				
In what capacity are you responding:	Don't know	No	Yes	Grand Total
An employee	1.26%	0.70%	3.65%	5.61%
An employer	2.10%	0.28%	10.38%	12.76%
Health and safety professional/Safety representative	16.69%	5.19%	55.96%	77.84%
Trade union official	0.14%	0.56%	0.14%	0.84%
Training provider	0.00%	0.28%	1.40%	1.68%
(blank)	0.00%	0.28%	0.98%	1.26%
Grand Total	20.20%	7.29%	72.51%	100.00%



Respondents were asked to identify additional items that were missing from the EIA. Those groups identified for inclusion were women, part-time workers, people with disabilities and young people and apprentices.

Question 5: Can you foresee any specific problems that might arise for employers, workers, enforcing authorities or any other groups if the proposed extension to over seven days is adopted?

The majority of responses repeated the comments made in question 2, either as advantages identified by supporters of the proposal, or disadvantages that prevented the respondents supporting the proposal.

Key themes were:-

- That the deadline by which reports must be submitted to the enforcing authority should be increased
- That better guidance was needed to reinforce that the injured person does not need to be absent from work to trigger a RIDDOR.
- Every day lost should be reported.
- RIDDOR should be made to align with the US reporting system to help multinational companies administer injury reporting.
- School pupils and students should be treated as employees for reporting purposes and not people who are “not at work.”

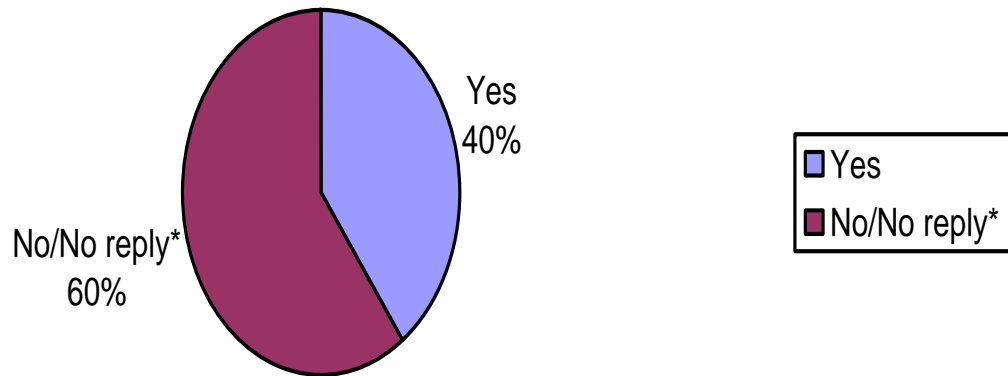
Question 6

Do you believe the loss of national data for over three to over seven day injuries would have adverse consequences and, if so, what would you identify those as being?

The responses received were:

	Number	Percentage
Yes	282	40%
No/No reply*	423	60%
TOTAL	705	100%

* Some responses were not in a format of the questionnaire and expressed more general support or opposition to the proposal and did not therefore address this question. These have not been included in the final count.



Respondents were asked to complete a free text box. Analysis of the answers showed common themes were that trends in incident data would no longer be identified because of the change. Other respondents believed that they would no longer be able to benchmark their individual organisation against national overall and national sector performance.