

Research Summary

Research on Occupational Lung Disease Digital Guidance

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Research conducted by We Are Snook Ltd

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Background and Objectives

Commissioning

This report is a summary of research conducted by We Are Snook Ltd in 2020. The research was commissioned by Insight and Service Design in the Health and Safety Executive (HSE).

The content of the report, including any opinions and/or conclusions expressed, are the views of the agency alone and do not necessarily represent the views of HSE.

Business context

Improving the HSE digital experience, including the website, is a key focus for HSE. The purpose of HSE's digital content is to:

- inform and educate about relevant health and safety (H&S) issues,
- provide statutory guidance, information and advice on how to proportionately manage H&S workplace risk,
- enable users to complete regulatory transactions with HSE, eg, report certain types of accidents or incidents,
- persuade and change opinion and behaviour,
- support interaction and engagement with HSE, and
- generate commercial sales of products (books, training, etc.)

As a result, HSE digital content must be available in the language of its users and be in accessible formats to reach as many potential users as possible. Although it was envisaged this project would likely result in a focus on digital guidance, HSE was also interested in understanding any other guidance channels identified by users.

The project used Occupational Lung Disease (OLD) guidance as a case study because it is a cross-cutting HSE priority area. The overall research objectives were to understand how and when guidance is needed, as well as how and where it is accessed.

Research Methodology

The research was qualitative in nature, comprising 25 in-depth interviews. The sample was designed to ensure a good range of trades, within small (5-49 employees) and medium (50-249 employees) enterprises (SMEs), and across different geographic areas. Employers and workers were considered in scope if they performed activities which put them at risk of OLD, or if they had responsibilities for workers at risk of OLD, such as: directors, partners, site managers, managers/supervisors and H&S managers.

The first stage involved desk research and 13 telephone interviews, followed by initial reporting. Fieldwork then resumed for stage two with another 16 interviews, including revisiting four participants and an HSE ideation workshop.

Main Findings

Current use of Occupational Lung Disease (OLD) Guidance

Types of guidance used and how they are sourced

Overall, participants were using a variety of guidance from different sources, such as: H&S consultants, knowledgeable colleagues or friends, and various online guidance including the HSE website and [toolbox](#) talks, online forums (for instance Facebook and trade related), Government H&S guidelines, and equipment or work materials providers. Those who used search engines were aware of the inaccuracy of unverified websites, but one participant also noted the “*HSE website is informative but not accurate for individual use*”. SMEs rarely paid for guidance, but they did pay for a H&S service such as training courses and consultants.

Managers were motivated to use guidance because they felt they had a duty of care, but they were also worried about being sued or having claims made against them. Workers tended to trust their employer to provide them with guidance, so were unlikely to proactively seek it. SMEs also mentioned having little time to seek out guidance: “*I’d like to educate myself and then have more knowledge. But I’m in a time crunch so it’s not really possible.*”

Managers saved online guidance to digital folders. Some SMEs had intranets or shared drives, however, these systems were mainly used by management and were rarely used by workers to access information. Managers typically shared guidance with staff in the following ways:

- Inductions when starting a job or at a new site.
- Posters and leaflets around the site and on notice boards.
- Regular toolbox talks or on-site briefings.
- Annual face-to-face training by a third-party provider.

Site inductions were thought to be where employees obtained most of their guidance, alongside regular toolbox talks about a H&S topic. They may consist of a talk by a manager, a slide show, or a printed booklet. However, inductions could sometimes feel like a tick-box exercise for employees because they tended to cover similar subjects and experienced workers have been through them numerous times. The usefulness of them depended on how they were delivered and whether employees related to them.

Managers reported using the following methods to ensure their guidance was being followed:

- Shortened employee guidance handouts for pre-site reading (printed and highlighted).
- Digitally communicating guidance via email, WhatsApp, and PDFs on iPads.
- Creating information packs which employees sign for.
- Turning HSE information into employee tests.

Despite this, such initiatives were not always adopted, for example employee tests were rarely used as there was a concern employees would fail the test and be unable enter the workplace. It was indicated that among smaller businesses it was less likely managers would check their workers were following guidance: *“In the end, they’re grown men. If they want to risk it, it’s up to them.”*

Which guidance channels are preferred and how the working environment affects this

Most participants were comfortable using technology in their everyday lives, however they had mixed responses when it came to using it on the job. Channel considerations were a mixture of:

- wanting to protect digital devices from damage on site or in workshops because they were uninsured against this type of damage;
- unreliable Wi-Fi which led them to prefer printed guidance material; and
- physical tools, for example paper and pen, being their preferred way of learning new content.

Print was the most common way of communicating guidance, however the research found paper guidance was printed and stored, and rarely revisited. It appeared the coronavirus pandemic had accelerated a move to digital, which started after the first stage of fieldwork. SMEs reported introducing digital tools and communications on site, by using ‘rugged tablets’, or providing employees with smartphones and data allowances. WhatsApp was often used to communicate with staff; however, emails were less common due to concerns around messages being overlooked.

When participants were asked about the HSE website specifically, it was thought to be *‘too wordy’*, which made content harder to read on smaller devices such as mobile phones. Others expressed the desire to have more visuals (images, graphics or videos) to help aid learning, or help them understand content faster, especially when they were on the go. Workers may also have English as an additional language, therefore written content is not always fully understood.

Respondents expressed the following preferences in terms of what they expected or wanted from guidance generally:

- The tone should be approachable and content needs to be simple, manageable and relatable to their industry and situation: *“Not everybody is smart as the person*

is writing it”, “If you’re implementing ridiculous health and safety regulations then the workers will just walk. They’ll go to somewhere else where it’s not the case”.

- It needs to provide users with reassurance that it is up to date.
- It should be applicable to multisite working.
- It could be more visual, making use of imagery and videos.
- It needs to be suitable for managers to share with older, more experienced workers: *“Sometimes we have to implement practices on sites and I’m just cringing with embarrassment”.*

Motivations behind using and seeking out guidance

Participants gave a mixture of proactive and reactive reasons for using guidance:

- They are new to the industry or role.
- They need to answer specific client or employee questions.
- They need to understand new equipment or site-specific risks.
- They want to be informed of guidance updates, including changes to regulation.
- They want to improve an existing approach.

Reasons for being motivated to seek guidance included to:

- learn how to protect employees or their organisation from prosecution by a regulator or cases of civil litigation;
- improve their knowledge on a topic;
- obtain reassurance, support and direction, for example asking questions in a safe space.

Updates and news tended to come through unstructured routes, although some managers checked for news a couple of times a year. There was a belief that H&S guidance does not change much, which is why SMEs did not feel the need to revisit topics after having looked at them once. Managers generally felt experienced and confident, so did not spend time seeking guidance or revisiting it.

“We might not look back on the guidance if we have already done it. That’s the risk with not knowing though, because sometimes... it may have been updated.”

How digital guidance is searched for

When searching for digital guidance, participants used search engines like Google by entering questions or keywords. They were more inclined to click on an HSE result because HSE is seen as a trustworthy source and is usually at the top of search results. Few go directly to the HSE website.

Usefulness and quality of guidance

HSE is a highly trusted source of knowledge, and seen as the place to go for accurate, up-to-date information as the national regulator for H&S: *“HSE are like what the NHS website is for illness - concise and vetted answers.”*, *“They’re the ones I would have to answer to”*. However, participants expected it to be simpler and easier to navigate: *“The HSE website can make me a bit bamboozled. It can be 20-30 pages long.”* and the style was considered outdated. Managers sometimes found it difficult to identify and distil the key points from guidance and worried they may be overlooking key information due to the length of the documents. It was also considered hard to find content, especially for new users: *“The website could be more intuitive”*, and some perceived that the design was not as mobile/ tablet friendly as it could be. Additionally, the language and tone of the website was considered off-putting by some participants, for example too expert focussed. Therefore, there was a mixed amount of HSE website usage.

Attitudes to gov.uk and other websites

Gov.uk was also seen as a highly trusted source of information. When asked to compare it with the HSE website, there was no preference, although they were both thought to be text heavy and slightly challenging to navigate, with individuals tending to use search bars to find content. When seeking OLD guidance, participants reported it can be difficult to find unbiased materials beyond HSE and other government channels, and they were unsure which they could trust.

Future use of digital guidance

Participants mentioned certain barriers to using digital guidance, such as having no Wi-Fi on site, minimal ability to charge electronic equipment and not being allowed to use mobile phones or tablets on site because they are uninsured, or the environment is too dirty: *“Our hands are so full of dust I only feel comfortable using my phone at lunch time”*. Given these barriers to digital are unlikely to be resolved in the short-term, it is important users have a multichannel guidance offering.

What digital products would they expect?

In terms of what participants wanted from future digital products, they mentioned:

- a H&S app;
- a confidential live chat or a phone number for H&S questions;
- an audio guidance feature such as Siri to answer questions; and
- an email address they could send H&S questions to.

What level of support would they expect?

Participants wanted to ask HSE for help and advice. However, HSE was viewed as a one-way provider of 'must do' H&S information, rather than a safe space where they could openly explore work related risks without fear of repercussions. These perceptions could act as a barrier to uptake of other free or paid for digital products, such as an advice line. Duty holders might prefer to go with a private H&S consultant, so they could be more honest about any issues. Most of the participants interviewed were unaware the HSE website offers paid content and were unsure of the benefits compared to free content.

When participants were asked specifically about content updates, they expressed a preference for receiving relevant ones through notifications, text, or email but headlines only: *"We don't want to receive a ton of mail"*. Other offline support suggestions included:

- a site visit *"Someone who comes down to help you and have a chat on your site"*;
- HSE network meetings;
- HSE approved websites for more detailed guidance questions; and
- HSE ranked/ graded list of protective equipment.

What would keep them engaged?

The degree to which lung health was prioritised varied by participants and was influenced by factors such as industry, company size, job role, age, experience in the industry and personal connections to the condition. To raise it as a priority they said they needed to see the risk increase, for instance increased dust in the workshop. It also needed to be relatable, for example by using industry specific stories and seeing the wider impact on their life: *"...the implications of it like a split up with the partner or going bankrupt. That would make people think more about health and safety"*. Companies could also be encouraged to talk openly about its impact because: *"Talking about lung cancer is a bit of a taboo subject"*.

Participants had preferred channels for digesting content, either in the office or on site. Therefore, to shift them to a new digital product, it would probably need to be better than their preferred one to create a change in existing habits, particularly for smaller businesses.

Summary

The research found paper guidance was commonly used but rarely revisited and SMEs were using digital tools and communications more often on site in response to the pandemic. It also reinforced the importance of raising OLD as a priority in a relatable way with SMEs, while ensuring associated H&S guidance meets certain expectations within a multichannel offering.



Further information

For information about health and safety, or to report inconsistencies or inaccuracies in this guidance, visit [the HSE website](#).

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