Workplace health and safety statistics for Scotland, 2025

Data up to March 2025
Annual statistics
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Introduction

This report represents a profile of workplace health and safety in Scotland and its primary purpose is to provide Scotland specific equivalents of the statistics for Great Britain published across HSE's Health and Safety Statistics pages.

The figures also enable comparisons between Scotland and Great Britain to be made. However, any such comparative analysis should be interpreted with caution since any differences in health and safety outcomes are likely to be at least in part driven by differences in the industry sectors and occupations people work in.

Key Statistics

122,000 workers suffering from work-related ill health each year
Source: LFS, annual average 2022/23-2024/25

26
fatal injuries to workers
Source: RIDDOR, 2024/25

40,000
non-fatal injuries to workers each year
Source: LFS, annual average 2022/23-2024/25

£1.6 billion cost of workplace injury and ill health
Source: HSE Costs to Britain, 2023/24

Work-related ill health

All illness

There are an estimated **122,000** work-related ill health cases annually. This represents a rate of **4,510** cases per 100,000 workers which is statistically significantly lower than the GB rate of **5,210** cases per 100,000 workers.

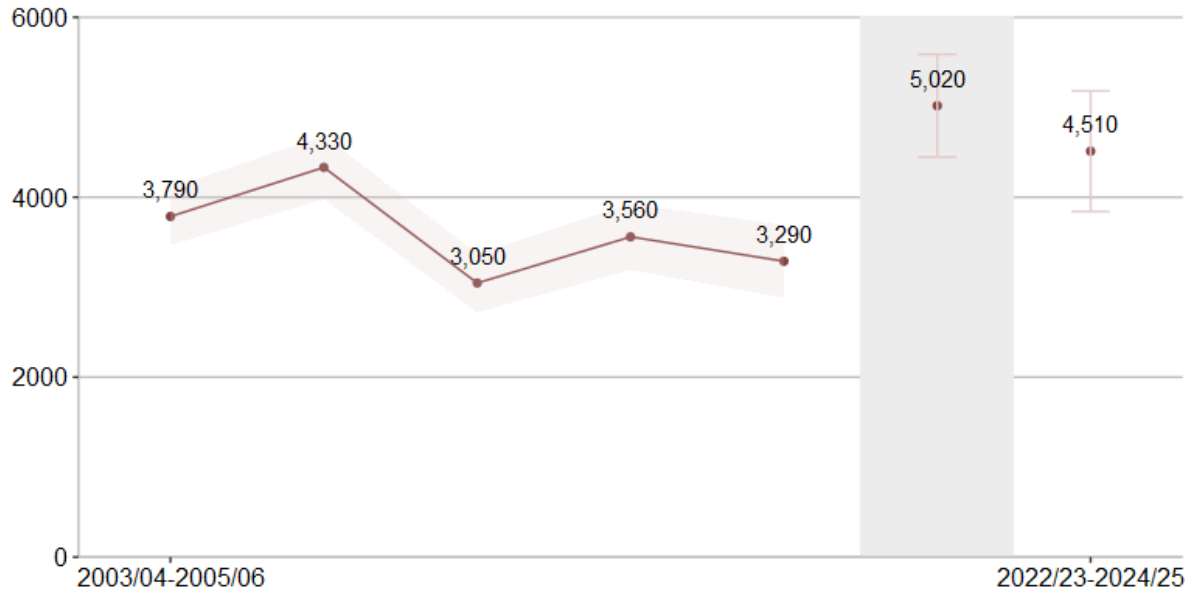
50% of new or long-standing conditions are stress, depression or anxiety and **31%** are musculoskeletal disorders.

An average **3.3 million** days are lost to work-related ill health each year, at a rate of **1.57** days lost per worker.

Source: LFS, annual average 2022/23-2024/25

The overall prevalence rate of **4,510** per 100,000 workers over the period 2022/23-2024/25 is not statistically significantly different from the rate from the previous 3-year period.

Rate of ill health cases per 100,000 workers over time



Source: LFS three-year averages with 95% confidence intervals. Latest data includes years affected by the coronavirus pandemic, shown inside the grey shaded column.

Musculoskeletal disorders (MSD)

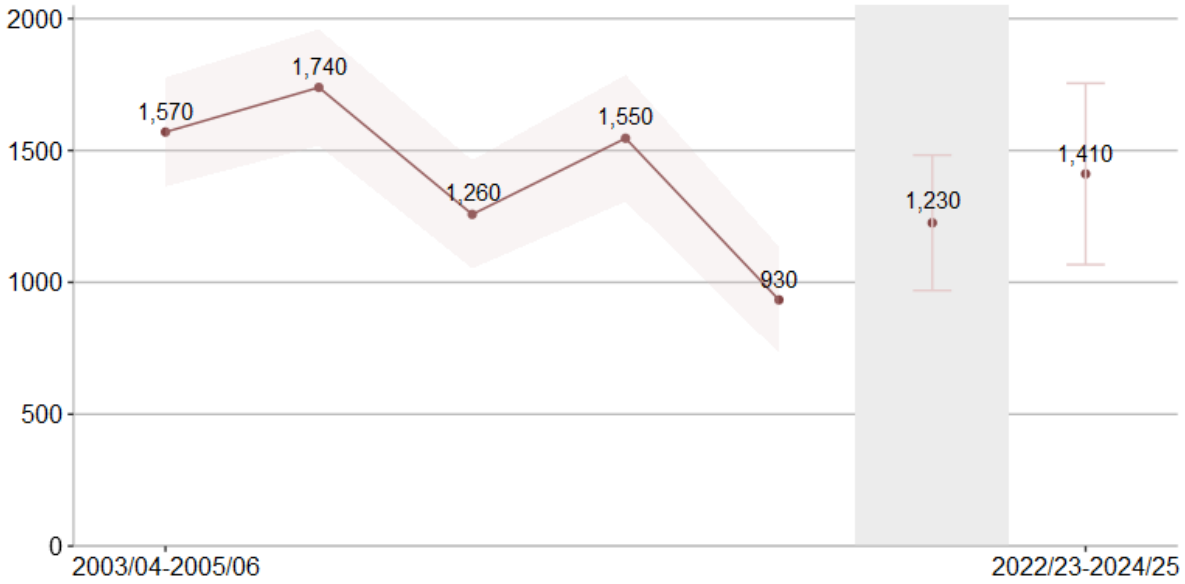
There are an estimated **38,000** work-related MSD cases annually. This represents a rate of **1,410** cases per 100,000 workers which is not statistically significantly different from the GB rate of **1,490** cases per 100,000 workers.

An average **0.5 million** days are lost to work-related MSD each year, at a rate of **0.24** days lost per worker.

Source: LFS, annual average 2022/23-2024/25

The overall prevalence rate of **1,410** per 100,000 workers over the period 2022/23-2024/25 is not statistically significantly different from the rate from the previous 3-year period.

Rate of MSD cases per 100,000 workers over time



Source: LFS three-year averages with 95% confidence intervals. Latest data includes years affected by the coronavirus pandemic, shown inside the grey shaded column.

Stress, depression or anxiety

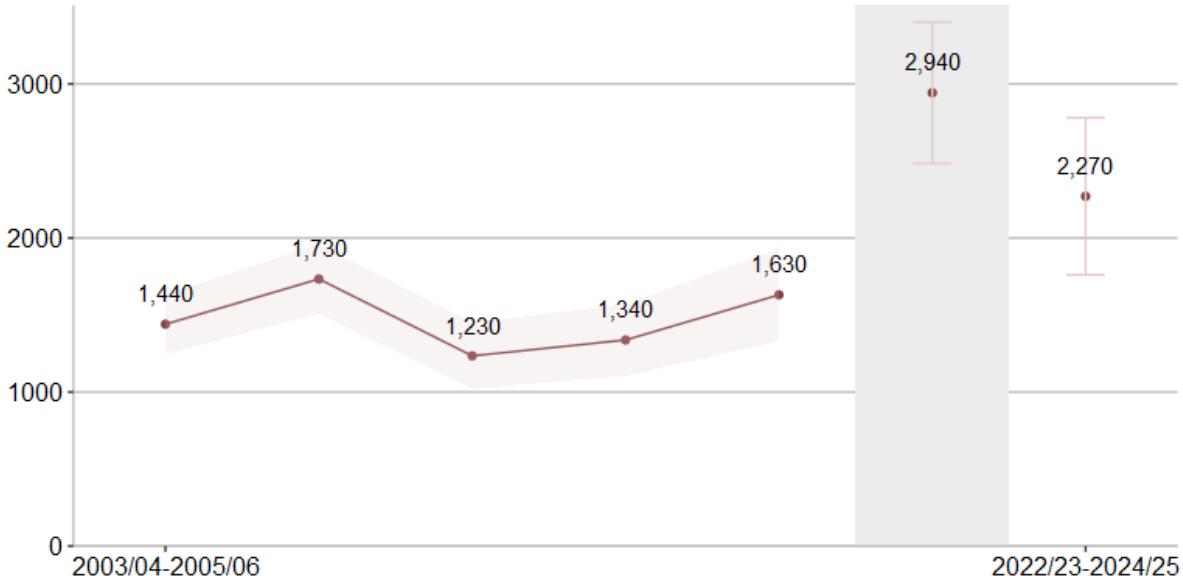
There are an estimated **61,000** work-related stress, depression or anxiety cases annually. This represents a rate of **2,270** cases per 100,000 workers which is not statistically significantly different from the GB rate of **2,580** cases per 100,000 workers.

An average **2.3 million** days are lost to work-related stress, depression or anxiety each year, at a rate of **1.07** days lost per worker.

Source: LFS, annual average 2022/23-2024/25

The overall prevalence rate of **2,270** per 100,000 workers over the period 2022/23-2024/25 is not statistically significantly different from the rate from the previous 3-year period.

Rate of stress, depression or anxiety cases per 100,000 workers over time



Source: LFS three-year averages with 95% confidence intervals. Latest data includes years affected by the coronavirus pandemic, shown inside the grey shaded column.

Occupational lung diseases and cancer

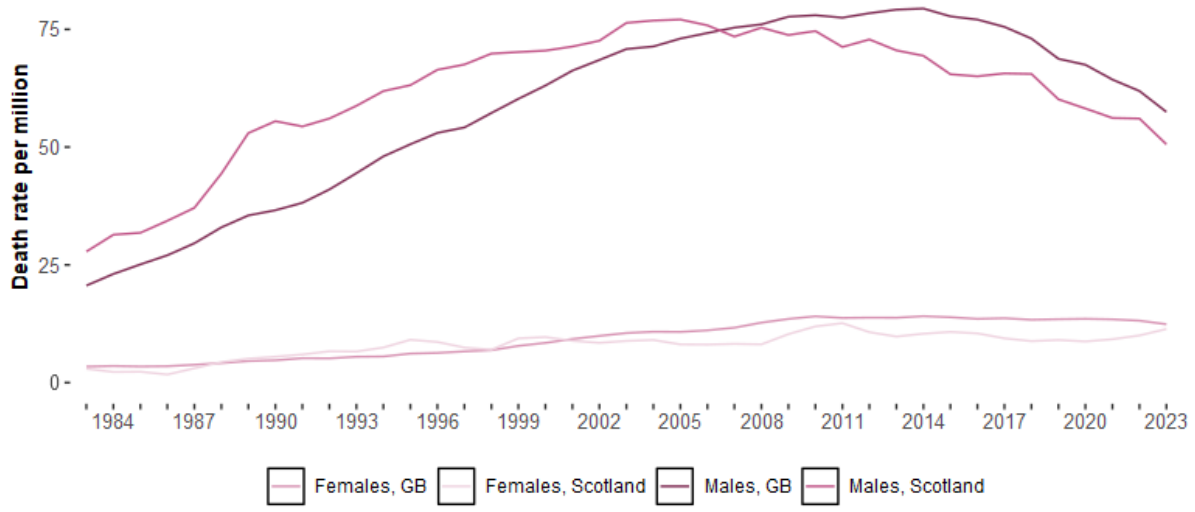
If past workplace exposures carcinogens were similar in Scotland to the rest of GB then currently there are around 710 deaths and 1110 cancer registrations (excluding non-melanoma skin cancer) each year in Scotland where such exposures contributed.

Annual mesothelioma death rates were higher in Scotland than GB as a whole during the 1980s/1990s but started to reduce sooner and are now lower than GB.

There are currently around 170 mesothelioma deaths each year in Scotland, based on a 5 year average, 7% of the 2,400 annual deaths in GB. Around 7% of Industrial Injuries Disablement Benefit (IIDB) cases for mesothelioma were in Scotland.

Sources: HSE Burden of Occupational Cancer estimates applied to Scottish cancer deaths (2020-2024) and cancer registrations (2018-2022); HSE mesothelioma register, Industrial Injuries Disablement Benefit (IIDB) scheme.

Mesothelioma death rates per million per year in Scotland and GB by gender



Source: HSE mesothelioma register

Workplace injuries

Non-fatal injuries

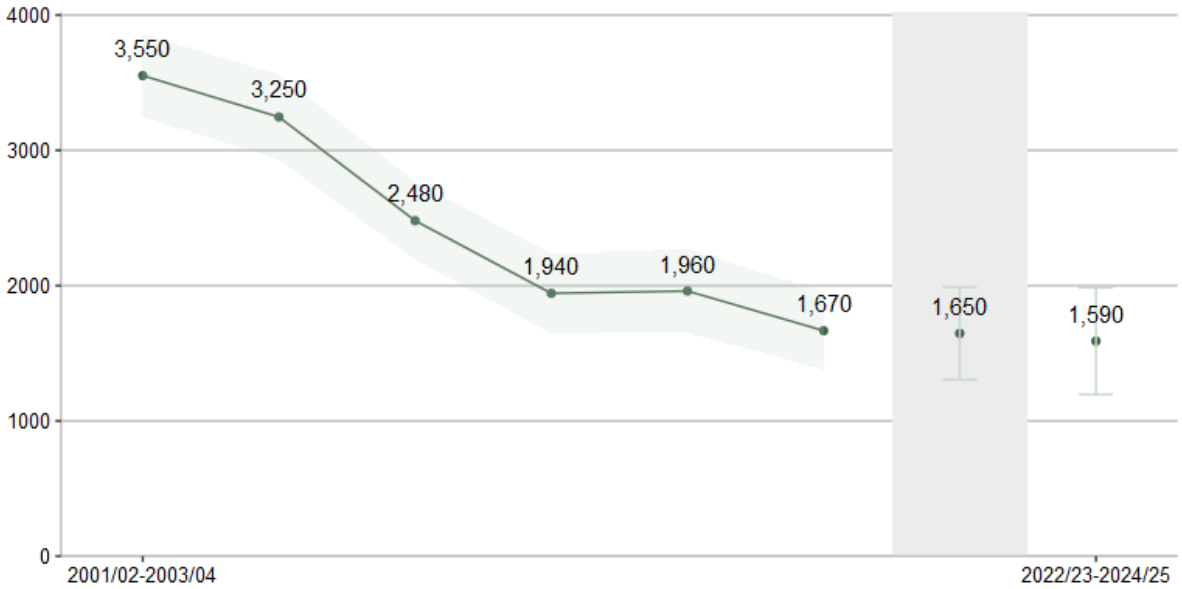
There are an estimated **40,000** workplace non-fatal injuries annually. This represents a rate of **1,590** cases per 100,000 workers which is not statistically significantly different from the GB rate of **1,920** cases per 100,000 workers.

An average **0.3 million** days are lost to workplace injury each year, at a rate of **0.13** days lost per worker.

Source: LFS, annual average 2022/23-2024/25

The rate for the period 2022/23-2024/25 was not statistically significantly different from the rate from the previous three year period.

Rate of non-fatal injuries per 100,000 workers over time



Source: LFS three-year averages with 95% confidence intervals. Latest data includes years affected by the coronavirus pandemic, shown inside the grey shaded column.

Fatal injuries

There were **26** fatal injuries to workers in Scotland reported in 2024/25.

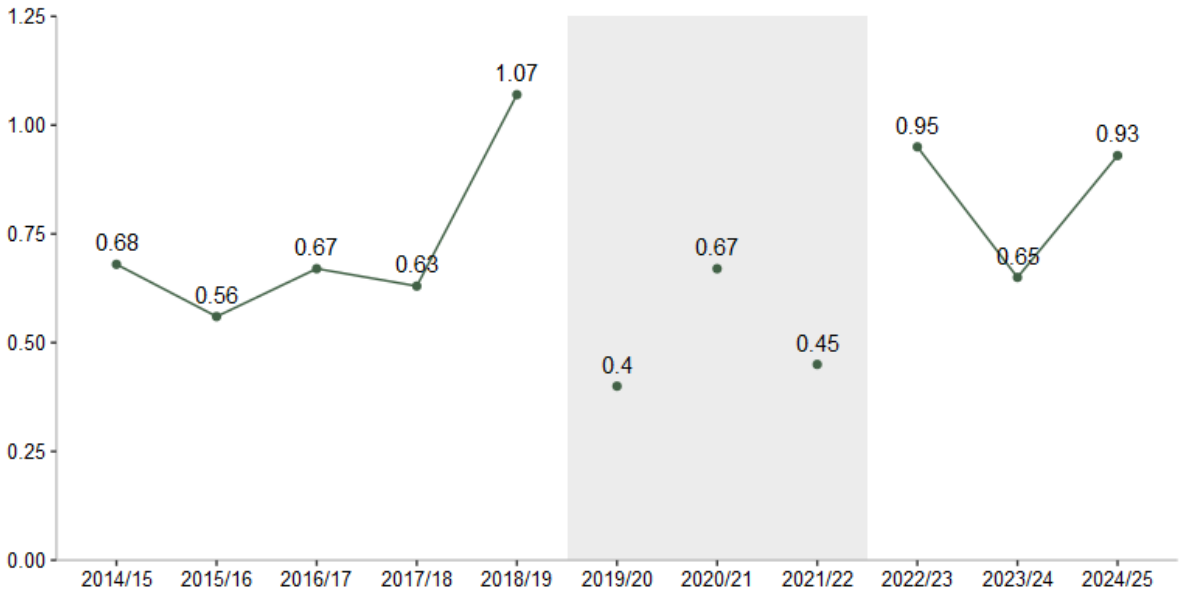
There has been on average **20** fatal injuries to workers annually over the last five years, but with marked fluctuations from year to year.

Across the five year period (2020/21-2024/25), this represents a rate of **0.73** fatalities per 100,000 workers, which is higher than the GB rate of **0.4** per 100,000 workers.

Source: RIDDOR, annual average 2020/21-2024/25

While annual figures have varied over recent years the fluctuations remain within the bounds of the natural variation that would be expected from one year to the next due to the overall numbers being relatively small. Fatal injury rates for Scotland are consistently higher than those of Great Britain.

Rate of fatal injuries per 100,000 workers over time



Source: RIDDOR. Latest data includes years affected by the coronavirus pandemic, shown inside the grey shaded column.

Fatal injury standardisation

Over recent years, the fatal injury rate in Scotland has been consistently higher than that of Great Britain, but there is no difference in the rate of non-fatal injuries.

One explanation is that in Scotland, a greater proportion of workers are employed in higher risk industry sectors or higher risk occupations, compared with Great Britain as a whole.

It is possible to standardise fatal injury rates by adjusting them to account for differences in industry composition between countries and regions and a recent research report shows the effect this has on the relative rates of the countries and regions of Great Britain. The table below shows estimates of the unstandardised and standardised country-specific fatal injury rates for the period 2015/16-2019/20 and the full report can be found at: webarchive.nationalarchives.gov.uk/ukgwa/20240605060625/https://www.hse.gov.uk/statistics/assets/docs/updated-standardised-fatals.pdf.

Number, un-standardised rate and standardised rate of fatal injuries per 100,000 workers (2015/16 – 2019/20)

Country	Number of fatalities	Un-standardised rate	Standardised rate
Scotland	88	0.65	0.57
England	529	0.38	0.39
Wales	58	0.81	0.65
Great Britain	675	0.42	

The standardised rate for Scotland is lower than the un-standardised rate, demonstrating that its different industry composition does have an effect on the comparison between Scotland and Great Britain.

However, even after standardisation the rate is still significantly higher in Scotland. It is likely that other factors, such as a different occupational distribution and other factors not related to employment, are also affecting the comparison. However, at present there is insufficient data available to enable the quantification of these effects.

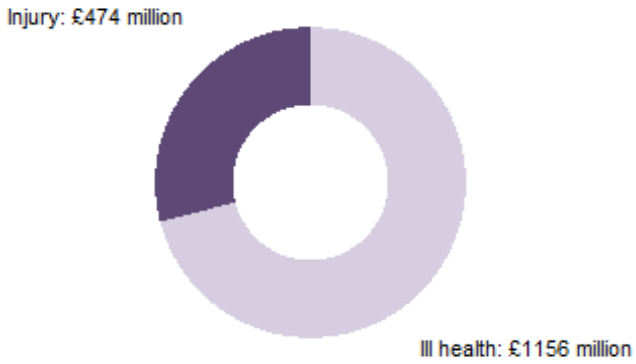
Costs to Scotland

Workplace injuries and ill health have serious effects on the individuals involved and their families, as well as employers, government and wider society. The impacts can be measured in terms of direct financial costs such as loss of production and healthcare, as well as human costs such as the impact on an individual's quality of life and, for fatal injuries, loss of life. HSE's estimate of the total costs of workplace injuries and ill health includes both financial costs and a valuation of human costs.

The total cost to Scotland of workplace injuries and ill health in 2023/24 was £1.6 billion.

Source: HSE Costs to Britain model

Cost to Scotland of workplace injury and ill health 2023/24



Source: HSE Costs to Britain model

Annex 1: Sources and definitions

The Labour Force Survey (LFS): The LFS is a national survey run by the Office for National Statistics of currently around 31,000 households each quarter. HSE commissions annual questions in the LFS to gain a view of self-reported work-related illness and workplace injury based on individuals' perceptions. The analysis and interpretation of these data are the sole responsibility of HSE.

Self-reported work-related illness: People who have conditions which they think have been caused or made worse by their current or past work, as estimated from the LFS. Estimated total cases include long-standing as well as new cases. New cases consist of those who first became aware of their illness in the last 12 months.

Self-reported injuries: Workplace injuries sustained as a result of a non-road traffic accident, as estimated by the LFS.

RIDDOR: The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, under which fatal and defined non-fatal injuries to workers and members of the public are reported by employers.
Certain types of work-related injury are not reportable under RIDDOR, hence excluded from these figures. Particular exclusions include fatalities and injuries to the armed forces and injuries from work-related road collisions.

HSE Costs to Britain Model: Developed to estimate the economic costs of injury and new cases of ill health arising from current working conditions. The economic cost estimate includes estimates of financial (or direct) costs incurred (either in terms of payments that have to be made or income/output that is lost) and the monetary valuation of the impact on quality and loss of life of affected workers.

Rate per 100,000: The number of annual workplace injuries or cases of work-related ill health per 100,000 employees or workers.

95% confidence interval: The range of values within which we are 95% confident contains the true value, in the absence of bias. This reflects the potential error that results from surveying a sample rather than the entire population.

Statistical significance: A difference between two sample estimates is described as 'statistically significant' if there is a less than 5% chance that it is due to sampling error alone.

Annex 2 Further information

Headline figures for ill health and injuries by country and region can be found at www.hse.gov.uk/statistics/regions, which includes a link to a suite of additional tables of regional comparisons. The injury, ill health, and costs statistics presented within this report can all be found within those tables. Further information on data sources can be found at www.hse.gov.uk/statistics/assets/docs/sources.pdf

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For information regarding the quality guidelines used for statistics within HSE see www.hse.gov.uk/statistics/about/quality-guidelines.htm

A revisions policy and log can be seen at www.hse.gov.uk/statistics/about/revisions/.

Additional data tables can be found at www.hse.gov.uk/statistics/tables/.

Lead statistician: Omid Zavareh

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