Effects of the recession on health and safety 2012

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Summary

In March 2012 the Society of Radiographers (SoR) surveyed accredited health and safety reps in the UK, to ascertain both the effects of the recession and the attacks from the "Con-Dem" Government where having on health and safety. This survey is conducted two years after the original survey. This document presents an analysis of this survey.

Foreword

In 2010 the Society of Radiographers conducted an online survey amongst all accredited health and safety representatives within the United Kingdom.

The aim of the survey was to ascertain the effect both the recession and the “Con-Dem” government has had on health and safety. David Cameron at every opportunity has undermined health and safety legislation since his election in May 2010. The Con-Dem government continue their almost daily deliverance of farcical statements which blame everything from the riots of last year and the recession on health and safety.

This document presents an analysis of an online survey in March 2012 of health and safety representatives, within the United Kingdom.

Respondents were asked the same questions (as the 2010 survey) regarding health and safety within their workplace. The survey was anonymous and covered all SoR accredited health and safety representatives. We identified 392 health and safety reps from the Society of Radiographers database and emailed to ask if they would complete the online questionnaire.

In 2010 some 57 respondents answered a range of questions in an online survey, whilst in 2012, 48 respondents answered the same questions, again in an online survey.

The survey used the online “Survey monkey”. Respondents where questioned as to whether they where experiencing difficulties in obtaining time off to perform their duties, whether there had been a rise in health and safety related incidents and whether reps felt sufficient time was being spent on health and safety or meeting targets.

This document compares the results from the 2010 and 2012 surveys and the following bullet points highlight the main findings:

- In 2010, 45.6% of SoR health and safety reps experienced are difficulties’ obtaining time off
to carry out their duties, whilst in 2012 this figure has risen to 50%, a rise of 4.4%,

- In 2010, 40% of SoR health and safety reps had seen a rise in staff being off work sick, due to work pressures they face since the recession started, in 2012 this number has risen to 40.4% a slight rise of .4%,

- In 2010, 40% of SoR health and safety reps felt that health and safety issues were losing priority on workplace agendas, in 2012 this figure has risen by 8.9% to 48.9%

- The trend of employers not fulfilling their legal duty to conduct a risk assessment has risen from 2010, 16.3% of SoR health and safety reps identified this as an issue, whilst in 2012, 25% have identified this a worrying rise of 8.7%

- In 2010, it was noted that 15.4% of staff did not receive health and safety induction training, whilst in 2012 just 4.3% of staff do not. Health and Safety reps still comment that agency, bank staff and students on clinical placement do not receive the required health and safety training when they enter into the workplace, this can often be scheduled for some 12 weeks after.

Issues obtaining time off to perform your duties?

Since 2010, the number of safety reps experiencing difficulty obtaining time to perform their duties has risen by 4% to 50% overall.

<table>
<thead>
<tr>
<th>As a SoR safety rep, are you currently experiencing issues obtaining time off to perform your duties?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>50.0%</td>
</tr>
</tbody>
</table>

Rises of any of the following health and safety related incidents?

In 2010, respondents identified a 40% increase in staff sickness due to increased work pressures since the start of the recession; this figure has risen steadily to 40.4%. Near miss incidents had
declined some 4.6% to 23.4% whilst workplace accidents have risen sharply from 2.0% to 6.4%.

Health and safety items losing priority on workplace agenda’s

In 2010, 41.5% of representatives’ felt that health and safety was currently slipping down the agenda, worryingly this has risen 7.4% to 48.9%. Continued attacks from both the government and tabloid press are leading employers to believe they have little responsibility under health and safety legislation - quite simply this is not true. We need to ensure all persons who have responsibility for health and safety within hospitals, become pro-active and keep employee’s welfare and safety higher on their agenda.
Risk assessments

The main requirement to conduct a risk assessment is in the Management of Health and Safety at Work Regulations 1999, which places a legal duty on all employers to carry out risk assessments. Since the 2010 survey the number of respondents who fulfilled their legal obligation of conducting risk assessments annually has decreased from 67.3% to 50%. Whilst rises of 8.7% for both risk assessments being conducted after an incident has occurred and risk assessments are not being updated at all.

Staff training

Providing staff with training whether it be induction, refresher or when changes with work practices or machinery is a legal requirement under health and safety legislation for the employer. Training is also imperative in ensure staff are safe whilst working due to the nature of patient led services and fast changing technology and work practices. Staff numbers receiving induction training since the 2010 survey has risen from 84.6% to 95.7% - a rise of 11.0%. Whilst the SoR welcomes this positive rise, it has been reported that induction training can take anything up to 12 weeks for the employee to receive - 12 weeks in which any workplace accident or injury could happen! Worryingly training when new machinery is being introduced has declined by 8.2% - bearing in mind, this training should take place before a member of staff begins to work with the machinery.
Effects of the recession on health and safety

Respondents again felt that more time is spent dealing with patient waiting list and management targets, whilst the SoR agree that these are indeed a priority, our members health safety and welfare also needs to be addressed, without their expertise patients would not be seen.

Faulty Machinery/Reporting
SoR members are frequently told to “do the best they can” or “we’re working on getting the machinery repaired”, “we have not got the money to repair the machinery” and continue to work with faulty equipment, this number has risen by 9.4% since 2010 survey. The regulations clearly require the employer to ensure that all equipment is suitable for the task for which it will be used, and maintain all equipment in good working order and give appropriate information and training to employees in use of the equipment.

<table>
<thead>
<tr>
<th>If a piece of machinery has a fault, after reporting it:</th>
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</thead>
<tbody>
<tr>
<td>Does funding finances dictate the above answer?</td>
</tr>
<tr>
<td>Is the machinery repaired quickly and efficiently?</td>
</tr>
<tr>
<td>Are you told to ‘carry on using the machinery to the best of your ability, avoiding hurting yourself’?</td>
</tr>
</tbody>
</table>

**Maintenance Programme**

The workplace, equipment, devices and systems should be maintained in efficient working order (efficient for health, safety and welfare). Such maintenance is required for equipment and devices which would cause a risk to health, safety or welfare if a fault occurred; and equipment and devices intended to prevent or reduce hazard.

<table>
<thead>
<tr>
<th>Does your trust have an effective maintenance programme?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is machinery routinely serviced? 0</td>
</tr>
<tr>
<td>Is machinery only serviced when a fault arises? 32</td>
</tr>
<tr>
<td>Is the machinery serviced when someone hurts themselves? 12</td>
</tr>
</tbody>
</table>
Injuries caused by faulty equipment

82.6% of respondents identified they had/or knew a member of staff who had suffered an injury, which was caused by unmaintained faulty equipment.

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**Injuries caused by unmaintained/faulty equipment**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are any members of staff suffering from any injuries caused by unmaintained/faulty equipment?</td>
<td>38</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Have they reported the injury?</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Filled in the accident book?</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Informed RIDDOR if applicable?</td>
<td>2</td>
<td></td>
<td></td>
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</tbody>
</table>

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Free Text responses

40 respondents skipped the question, whilst 8 provided the following comments

**Themes arising from responses**

**Tick box exercises**

Example comments

A lot of time and money is spent on tick box exercises which don’t achieve anything but make the higher management look good

**Management support**

Trusts still expect the same results from the same few staff with no support from management

**Staff shortages**

I have time for health and safety duties but because we are so short staffed I feel somewhat guilty asking for time to do the work as it will leave areas short of staff

Due to uncertainties at managerial level as our Trust merged with another, we lost our Trust H&S officer who was not replaced. Since his departure, H&S has become fragmented, no H&S warden training is being undertaken; and faults reported to Estates take weeks longer to be repaired due to redundancies in that dept. Much of our in-house...
management has decamped to the other Trust site with whom we've merged. Whilst this is a 'local' issue, the merger only occurred as a result of the current financial situation of the NHS.

**Cost Cutting**

Health & safety is not a priority. Emphasis is on cutting costs and reducing quality of life for radiographers/Sonographers. Managers live in cloud cuckoo land. They expect staff to provide continuing high quality service but not provide any additional support to frontline staff.

**Workload/Staff sickness**

Increased work load, focus on waiting lists and staff shortages have had an affect on staff well being and increased injury/sickness levels so H&S had strongly focused no how to reduce/help in this situation.

**Stress**

There is a general stress on everyone not just from a health and safety angle. Staff are under pressure from all angles.

**Conclusion**

This report clearly demonstrates the further decline of employer’s perception of the importance of health and safety. This has been further confirmed by David Cameron and his Con-Dem governments determined assaults that health and safety as a burden on business.

The Government is blinkered to the real issues affecting employees – two million people in the UK have an illness or injury caused by their work – the vast majority of which could have been prevented had their employer taken the correct safety precautions.

The SoR are clear with what we want and need: a binding commitment and action from a Government which should be protecting us, rather than taking workers back to Victorian times, tipping the legislative balance away from employees, in favour of employers who put cost-cutting and profits before the health, safety and welfare of their most valuable resource – their employees!

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