
HSE Funding
The Case for more resources
A TUC briefing

HSE Funding - a case for more resources

HSE Finances- the case for more resources.

HSE's budget has been cut considerably in real terms since 2002, with 'flat cash' settlements since then: i.e. not keeping up with inflation. The 2004 Spending Review settlement has meant that huge cuts are having to be made to stay within budget. The latest cuts announced in August mean a further 250-350 posts are to be lost by 2008 via natural wastage. HSE will by 2008 have lost around 17% of the staff it had in 2002 when comparing like with like. On top of this, the pressure is set to get worse in this Autumn's Comprehensive Spending Review if HSE's parent department, the DWP, passes on its 5% year on year cut to HSE (not including the impact of rising inflation on the HSE budget).

What HSE Does

Surveys consistently show that HSE is one of the most highly regarded public bodies amongst members of the public, employees and employers.

HSE is internationally respected for its expertise on health and safety and has provided a model for many other countries. It produces authoritative advice and guidance; quality research; and a first class forensic capability when things go wrong such as Buncefield. They have experts in engineering, nuclear safety, occupational health and so on. But many specialist skills are facing severe shortage, as HSE is unable to recruit at market levels and can no longer afford to maintain its expertise.

HSE use a range of techniques to remove risks from the workplace, and to improve the way health and safety is managed. They prefer to get voluntary compliance but when that doesn't work they can force changes. They also take action when things go wrong and prosecute for serious breaches of the law. Simply put: they save lives!

It's Criminal

Using very conservative estimates, eleven times as many people are killed at work or by their work than through acts of homicide. 18,000 violent crimes a year require hospital treatment whereas there are 39,000* workplace major injuries (things like amputations, fractures to limbs, serious burns, or injuries requiring at least 24 hours in hospital). HSE has a massive job to do to get people to take workplace injury seriously, let alone ill-health. Yet it receives about as much public funding as Avon and Somerset Police Authority.

The argument is made that HSE has no monopoly over saving lives and so the government has to balance expenditure between departments who also have a good claim over funding to save lives. A big difference though is that lives are being lost through injuries and ill health inflicted on employees due to unpunished criminal acts. Poor health and safety is costing the economy billions of pounds (between £20-30bn), so investing just small amounts in regulation would have a huge payback to the economy as well as being morally justified.

Prevention should be the priority

The business case for increasing resources for the HSE is obvious. By preventing people becoming ill or injured through work we can save billions of pounds through sickness absence, medical costs and compensation. Yet the amount that the Government gives to the HSE is less than a third the amount that the state pays out through the industrial injuries scheme. It just does not make sense.

No Justice for Victims

Around 85% of major injuries reported to HSE are never investigated (and there are known to be a large numbers that never even get reported). There is only so much that the 500 or so inspectors in HSE's Field Operations Directorate (FOD) can achieve. This means that very serious career-ending accidents go unpunished simply because there is no one to gather the evidence.

The number of prosecutions has fallen to just 712 for 04/05 as prosecutions become more complex and HSE's emphasis shifted onto promotional and campaigning activity away from its enforcement role. The number of prosecutions is now half what it was in the early 1990s – this simply means more employers are getting away with it, not that they more compliant.

Very few cases of occupational disease are ever investigated. In the early 1990s HSE employed around 50 occupational physicians, it now has just 7, despite there being a legal duty in the Health and Safety at Work Act and under ILO conventions for them to maintain an Employment Medical Advisory Service.

There is much in the press about how we, as a society, are risk averse. That health and safety stifles innovation. We are actually very risk tolerant. This tolerance accepts every year: 340 fatal workplace injuries, between 10 and 20,000 deaths from occupational diseases, a further 1000 deaths on the road of people at work, 39,000* major injuries, and 200,000* injuries keeping people off work for more than 3 days.

HSE Stretched too far

There are more traffic wardens in London than there are inspectors in the whole of HSE's Field Operations Directorate. As the small band of inspectors are increasingly stretched, the total number of inspections carried out in FOD has fallen by over 25% in 3 years, as figures obtained by *Hazards* magazine (www.hazards.org) have revealed. The HSE say that the actual contact time with employers remains constant – that we spend more time with fewer employers - implying that this represents better targeting of effort. This disguises

a fall in the time spent on inspection, something distinct from 'contact' (which could be time spent on the phone or visits by other HSE staff who have no regulatory role and limited training).

Figures on inspection numbers can be misleading, but the unions in HSE estimate the number of inspections carried out in FOD to be around half of what it achieved in the early 1990s.

Inspection only represents part of what HSE does. The cuts are hitting Administrative staff and those doing essential policy work. Administrative staff are vital to HSE, without them frontline work grinds to a halt, and inspectors get tied up with paperwork and data inputting. For example, prosecutions already have a delay of six weeks because there are insufficient typists to type out statements. Policy work that could be affected includes work on EU directives to make sure they don't adversely affect UK interests.

Inspector Numbers

Figures for inspector numbers in HSE can be misleading. The official line is that there were 1,530 in 2005. Many of these, however, do no inspection, being in policy jobs or purely management roles. The true numbers of front line inspectors (who actually go out and inspect) is nearer 900.

In the Field Operations Directorate for the whole of Great Britain there are around 400 to cover all the inspections, investigations and prosecutions for all manufacturing (except chemicals manufacturing), the health services, education, all local authority activities, Govt departments and agencies, fire and police services, the defence industry and MOD, agriculture, fairgrounds, domestic gas safety, utilities, ports and docks, and others. Construction has around 100 inspectors, chemical industries around 80, offshore safety around 120 and there are in addition around 180 operational specialist inspectors and engineers. It is little wonder that workplaces will have an inspection once in a blue moon. It throws into question the UK's compliance with ILO convention C81 which says that the 'number of labour inspectors shall be sufficient to secure the effective discharge of the duties of the inspectorate,' and that 'workplaces shall be inspected as often and as thoroughly as is necessary to ensure the effective application of the relevant legal provisions.'

Other HSE staff play a vital role in getting information to employers, but unless there is a credible threat of receiving an inspection, the effectiveness of alternative intervention techniques is diminished.

Zero-deaths Olympics?

With so few staff, HSE's chances of properly regulating the 2012 Olympic development seems remote, or only achievable by taking it's eye off the ball elsewhere. With world attention focussed on Britain it is vital we project the right image. The Olympics cannot be worth a single life. New money must be found urgently to provide adequate regulation to stop these games being built on the suffering of those building and delivering them.

It should also be a high priority to set up a forum to bring together unions,

businesses, regulators, the Olympic Delivery Authority, local and national government and others to agree how to achieve a zero deaths games. The Wembley Stadium development has been fraught with health and safety problems: including one death and several extremely serious accidents. We can only avoid repeating this on a much bigger scale if we apply best practice in the planning, procurement, building, and delivery phases backed up with adequate regulation. So far there are some positive moves, but also some worries: already in the enabling works there have been two major accidents.

*figures include a factor for underreporting, as revealed by research.