



Health and Safety: Priority issues for the 2011 Scottish Parliament Election

The Scottish *Hazards* Campaign Network campaigns for improved worker health and safety throughout Scotland and joins with others internationally to campaign for improved working conditions throughout the world. It is part of the UK Hazards Campaign and the European Hazards Network.

The Campaign has major concerns about the present state of workplace health and safety in Scotland and, even more so, about the implications for working conditions of the current financial crisis and projected public sector cuts. It is crucial that the electorate and those running for office in the 2011 Scottish Parliamentary elections give priority to keeping people in work and keeping them safe at work.

We campaign for the right of every person to return alive from work each day and to return as fit and as healthy as when he or she left home that morning.

At present much of health and safety (H&S) is reserved to the Westminster Parliament. Therefore this list of positive actions on H&S identifies separately what could currently be addressed by the Scottish Parliament and what could be addressed given further devolution of H&S.

We are inviting each political party in Scotland to support these priority actions on occupational health and safety and to send us a statement responding to them which we will circulate to our members.

- **Protect and strengthen H&S enforcement**
- **Reject the deregulation argument and where necessary strengthen regulation**
- **Work toward more effective prosecution and penalties**
- **Ensure that companies and their directors are adequately held accountable for putting lives at risk**
- **Recognise occupational injury, ill health and death as a major public health issue**
- **Adopt a Toxics Use Reduction strategy**
- **Work toward a comprehensive NHS based Occupational Health Service**
- **Protect and strengthen the rights and work of trade union H&S representatives**
- **Fund a Scottish Hazards Centre**
- **Recognise and promote International Workers Memorial Day**

Background

It is important at the outset to refute the often voiced assertion that the UK has an exemplary H&S record. In January 2010, a well [recognised H&S risk index](#) ranked the UK as only 20th among OECD countries and 30th internationally. There is need for the improvements we suggest in this paper.

Enforcement

Breaches of H&S laws are criminal offences. Adherence to these laws must be properly enforced. Research shows that good enforcement of the law is the most effective way to drive up H&S standards. The bodies charged with that enforcement must be properly resourced. It is also crucial that political priority is given to enforcement and prosecution of crime.

We are aware that **local authorities** are and will continue to be under huge financial pressure. This must not be allowed to lead to reduced investment in their H&S enforcement role.

With further devolution of H&S, Scotland could improve resourcing of the **Health and Safety Executive** and commit a higher proportion of those resources to its core duties of inspection, investigation and enforcement action.

Background

The effectiveness of enforcement

An academic review of the international literature carried out by Dr Courtney Davis in 2004 found that “*the evidence shows, overwhelmingly, that it is regulation – including the threat of credible enforcement – which is the primary driver motivating organisations to improve their OH&S performance*”. ([Making Companies Safe: What Works?, Centre for Corporate Accountability, 2004](#))

This finding is reiterated by the [Work and Pensions Select Committee report](#) on the work of the HSC and HSE (2004) recommended that:

15. *The evidence supports the view that it is inspection, backed by enforcement, that is most effective in motivating duty holders to comply with their responsibilities under health and safety law. We therefore recommend that the HSE should not proceed with the proposal to shift resources from inspection and enforcement to fund an increase in education, information and advice.*

Previous reduction in enforcement activity

In an Institute of Employment Rights [briefing](#) published in July 2010, academics Steve Tombs and David Whyte reported that over the past decade there has been:

- A 69% fall in the number of inspections made of business premises;
- A 63% decline in investigations of safety incidents at work;
- A 48% reduction in prosecutions

Even in 2001/2 major concerns were voiced by researchers about the level of HSE enforcement activity. A study by the [Centre for Corporate Accountability](#) found that In 2000-2001, the following were not investigated:

- 3 percent of deaths of workers;
- 10 per cent of deaths of the public;

- 80 per cent of major injuries to workers;
- 93 per cent of major injuries to the public;
- 70 per cent of dangerous occurrences;
- 95 per cent of over-3 day injuries;
- 55 per cent of industrial diseases

HSE prosecutions have more than halved since 2001. In that time the number of workplaces enforced by the HSE has increased but the number of inspectors fallen. In 2001 an average workplace could expect a visit once in 8.4 years (in itself not adequate). By 2009 it was one in 38.4 years. ([Hazards website](#))

Recommendations of the report of the Work and Pensions Select Committee, 2004 included doubling the number of HSE inspectors. In [2008](#) that same Committee said *The HSE aims to meet a 60:40 ratio of proactive and reactive work ,however we heard that not only are businesses likely to have an HSE inspection just once every 14.5 years but that also accident investigations are being scaled back. Academic research has highlighted the influence of the number of inspections on levels of compliance with health and safety obligations.*

Figures recently published by Hazards Magazine (March 2011) show a fall in the number of HSE staff from 4545 in 1994 to 3611 in 2010 (this is *before* the anticipated 35% cut)

In relation to HSE enforcement in Scotland, the [University of Stirling's Occupational and Environmental Health Research Group](#) (OEHRG) stated in 2008:

In Scotland, ..the fall (in the number of people employed by the HSE) is more dramatic still with numbers employed dropping year on year from 2003/4 when the figure was 304 full-time equivalents (FTEs) down to just 264 in April 2008, a fall of over 13 per cent. The number of posts lost at the safety watchdog covering Scotland's key industries are more dramatic still. Frontline inspectors covering factories and agriculture have dropped by over 16 per cent. Offshore inspectors are down by 20 per cent and only one inspector covers all of Scotland's quarrying industry. Quarrying is the most hazardous land based occupation in the UK..... since the ICL Stockline factory blast which killed nine and injured dozens more, HSE staffing in Scotland has fallen year on year.

Future resourcing of enforcement/ proposed cuts

On top of these previous reductions, in October of 2010 it was announced that the HSE budget would be cut by 35% between 2011 and 2015. This will reduce the public funding of the HSE to less than 50% of its current spend. It is planned to recoup some of this by increased charges on business. We have major concerns that this will mean the HSE will not be able to plan enforcement activity on the basis of need and evidence based priorities.

When these new cuts in the HSE budget were announced the policy and technical director of the [Institute of Occupational Safety and Health](#) (IOSH) Richard Jones said:

Cuts to the HSE don't just risk livelihoods, they risk the lives of the people we are

trying to protect. And if inspectors are forced off the front line to complete the paperwork that a declining admin staff would previously have done, we could potentially see a hockey-stick effect, where death and injury rates increase once more. The UK workforce needs a properly resourced HSE and effective workplace management.

Local Authority Enforcers

It is more difficult to give detailed figures regarding local authority enforcement activity as it is devolved to Scotland's 32 local councils. However, it is hard to see how environmental health services will not be affected by announcements of a cut in funding for Scotland of 3.3bn over the coming three years with a shortfall in this year's Scottish budget of 1bn and 2.6% 'efficiency savings' across all local authorities. 'Councils are already planning budget cuts and job losses over and above this budget allocation due to higher inflation, reducing income, rebuilding balances and demand for services in a recession'. ([Unison](#)) Some [councils](#) have already announced cuts in enforcement services. See also fears regarding [public health](#)

Over the coming months, Scottish Hazards and the STUC will be seeking information from all Local Authorities about levels of environmental health funding and enforcement activity to enable us to better monitor the impact of public expenditure cuts in this area.

Our Priority: **Protect and strengthen H&S enforcement**

Regulation

What happened in the banking and finance sector has reinforced our opposition to the UK government's push for deregulation in H&S. The Scottish Parliament should use its influence to refute spurious arguments about over-regulation in H&S and recognise that it is workers, their families and communities who pay the cost of regulatory failure. Further devolution would also give Scotland power to strengthen the law, for example in relation to working time and work related stress, use of toxic chemicals and corporate accountability. In 2010, the Scottish Parliament missed an opportunity in this regard by failing to pass the Protection of Workers (Scotland) Bill.

Background

De regulation

The argument for overall de-regulation was put forward in the 2010 manifestos of both parties now in government in Westminster. A major argument for this is that regulation threatens job creation. However, this argument does not hold up. In 2006 the OECD itself accepted that countries with very different levels of regulation had experienced equal levels of success in generating employment. (OECD (2006) [Job Study](#))

De regulation of H&S

October 2010 Lord Young, commissioned by the government, produced his report [Common Sense, Common Safety](#) – a 'review of the operation of health and safety

laws and the growth of the compensation culture'. The report recommended, among other things:

- 'a reduction of burdens for low hazard environments' such as 'such as offices, classrooms and shops'
- a reduction in 'disproportionate' regulation on small businesses.

This is not new. In the 1980's the Conservative government also reviewed regulations, also under Lord (then Mr) Young, with a view to removing unnecessary regulation. In the end no regulations were found to be unnecessary.

This is perhaps because claims of an increasing burden of regulation are not true. In fact, examination of the level of regulation shows that there is now 46% less regulation than in 1974 and 37% less than 15 years ago. ([TUC 2010](#))

The regulations business argue are burdensome are not H&S gone mad. The 10 sets of regulations identified as costly by British Chambers of Commerce in 2009 included those covering asbestos, explosives, chemicals hazardous to health, noise, working at height...The BCC estimate the annual total cost *to industry* as 2.2bn. However, that must be put into perspective alongside the findings of an [HSE 2008 economics briefing](#) which estimated the cost of *each workplace fatality* as 1.5m, and a [government regulatory impact assessment](#) in 2006 put the cost of non-asbestos occupational cancer alone at between 3.3 and 12.3bn

'Low Risk' workplaces?

2010 HSE statistics show that some of the "low-risk" workplaces defined by Lord Young in his review (e.g. shops, offices and schools) as requiring less rigorous health and safety assessment are among the worst performers, in terms of illness and injury rates last year. The 'health/social work' and 'public administration' sectors, and the 'professional' and 'personal service' occupations had the highest rates of illness, with the 'personal service' and 'elementary' occupations having statistically significantly higher rates of both injury and ill health compared with all occupations. Teachers suffer disproportionately from work related stress and there is increasing concern regarding teacher exposure to asbestos. The retail sector suffers a higher than average rate of violence and aggression (British Crime Survey)

Equally, the small businesses who it is claimed are 'disproportionately' regulated are in fact over represented in the most hazardous sectors – construction (in 2009/10 a fatality rate 4 times the average), agriculture (in 2009/10 a fatality rate 16 times the average) and transport and often have the least access to good OH&S support. ([TUC 2010](#))

In 2004 the Stockline ICL plant in Glasgow exploded, killing 9 people and injuring 40 others, some very seriously. Following the 2009 Gill Inquiry into that explosion, the families of five of those killed – Annette Doyle, Kenneth Murray, Thomas McAuley, Tracey McErlane and Anne Trench – expressed concern that the inquiry did not examine these wider health and safety failings of regulation. A statement said: "*The time has come for the HSE to accept that soft touch*

regulation does not work, and that workers throughout the UK should have confidence that health and safety regulators have employers quaking in their boots.”

Self regulation

Part of what the UK Government argued for in the 1980's and is again being put forward is self regulation. This is in part modelled on the US system called 'Voluntary Protection Programme' - a business-friendly measure promoted under President Bush. However, questions have been asked about this approach after reports that the some VPP sites had accident rates above the average for their industry and others had convictions for serious safety offences. An example of similar concerns from the UK is the construction company Costain, exempted in the 1980's from HSE inspection because it argued its H&S management and accident record were better than others in the industry. This was abandoned when a worker was killed on a Costain site.

Further argument against self regulation comes in other areas, for example the need to move from voluntary to legislative action on smoking in public places and the use of seat belts.

Compensation Culture

Also considered by Lord Young's report is how to address what is claimed to be the 'growth' of a 'compensation culture' within H&S. However, again, the evidence does not support this claim.

A submission to Lord Young's review from Thompsons Solicitors, the largest law firm providing personal injury legal support to unions, notes: "Over the last decade the numbers of union-backed personal injury claims have fallen and the overall number of employers' liability claims (union and non-union) have fallen." The submission points to the government's Compensation Recovery Unit (CRU) statistics which show "that employer liability claims have fallen 69 per cent from 2000/01 to 2009/10 – from 219,183 in 2000/1 to 78,744 in 2009/10."

Complaints from business about the cost to them of this 'compensation culture' are challenged by a [2008 analysis by the UK Health and Safety Executive \(HSE\)](#) which concluded that: "Although the costs of workplace injuries and work-related ill health are attributable to the activities of the business... the bulk of these costs (3/4) fell 'externally' on individuals and society."

Our Priority: Reject the deregulation argument and where necessary strengthen regulation

Prosecution

Penalties imposed on businesses convicted of putting their workers at risk are unacceptably low and as such do not act as a deterrent to further criminal negligence. In 2010 the Scottish Parliament missed an opportunity through the **Criminal Sentencing Equity Fines Bill** to strengthen these penalties.

Further devolution would provide the Parliament with this and other avenues through which to impose more effective penalties.

Background

In 2008 the House of Commons Select Committee on Work and Pensions said: *we conclude that current levels of fines for health and safety offences are too low and do not provide a sufficient deterrent to ensure duty holders comply with their obligations. We would also like to see more innovative penalties to encourage compliance among employers*

A UK case: A case that illustrates the lack of effectiveness of the UK's current regime of H&S fines is Corus. When Blast Furnace 4 at Corus in Port Talbot exploded in 2001, killing 3 and injuring 9 badly, the company was fined 1.3m and 1.7m in costs: a huge fine, but minute in light of the annual turnover that year of £7,699m, and a fine that clearly didn't work. In 2007 another worker was killed (Corus fined 240000) and in 2010 another worker died in Scunthorpe. Since 2001 Corus has had 16 separate entries in the HSE prosecution data base for death and injury and 24 entries in the notices database. See further [information and the stories of bereaved families](#)

A Scottish case: In 2007, ICL pled guilty to breaches of health and safety legislation in relation to the 2004 Stockline explosion. The punishment for killing 9 people and injuring 40 others was £400,000. Grieving relatives were incensed and felt insulted by the low level of the fine (The investigation itself cost £1m of public money and the cost of preventing the explosion would have been £405) ([The Scotsman](#))

In February 2010, in response to guidelines on sentencing guidelines for companies when workers are killed through negligence, [FACK](#) (an organisation representing the families of people whose relatives have died through work) said: *Financial crime such as fraud or anti-competition acts can be punished by severe penalties such as imprisonment of individuals and hefty fines up to 10% of corporation's turnover. Yet we are told, applying that link between fines and turnover in the case of killing someone is unworkable! , Suggested fines of £500,000 for Corporate Manslaughter, or £100,000 for HASAWA offence causing death, will be a miniscule fraction of 1% of the turnover of a large corporation. We do not think such fines provide an effective deterrent to stop totally avoidable deaths happening in workplaces every day. "These guidelines tell employers and the public that workers' lives are not that important, and they are a slap in the face for families like ours who have paid the real price of employers' failure to comply with health and safety law."*

Our Priority: Work toward more effective prosecution and penalties

Corporate accountability

Culpable Homicide

Criminal negligence leading to the death of a worker must be met with the same severity

as other criminal acts leading to death, e.g. driving under the influence of alcohol or drugs. UK law in this area is very weak. The Scottish Parliament could and should enact stronger legislation in relation to **corporate culpable homicide**.

Background

In 2005, the then Scottish Justice Minister, Cathy Jamieson established an [‘Expert Group’](#) on corporate homicide. This group’s report and recommendations should be re-examined by the Scottish Parliament with a view to strengthening the law in this area.

Directors duties

Further devolution would enable the Scottish Parliament to impose a new positive legal [H&S duty on directors](#), given the clear unequivocal failure of voluntary guidance in this area.

Background

An [enquiry](#) into the underlying causes of construction fatal accidents, commissioned by the Secretary of State for Work and Pensions (2009) recommended:

There should be positive duties on directors to ensure good health and safety management through a framework of planning, delivering, monitoring and reviewing. The duties should be explicit so that everyone knows what is expected and breaches can be more clearly identified. As with most advances in society, e.g. seat belts in cars, drink driving, there comes a time when good practice has to become a legal requirement. I believe the time is right to introduce a clearer sign that society wishes to prevent fatalities and demands a higher standard of behaviour from those in the construction industry who do not at present follow good practice. The major contractors have nothing to fear from such a regulation. Indeed it might help them to raise standards.

In the example of Corus above no director of Corus was held responsible. In the Stockline case, no director was held responsible.

The authors of an independent academic study of the Stockline explosion, stated that: “The failures that still require urgent action relate to those of ICL and companies like them at board and senior level.”

The House of Commons Select Committee for Work and Pensions 2004 concluded that the Government should legislate on Directors’ Duties. The 2008 Committee said that if the voluntary approach, further supported by new HSE guidance on [‘Leading for Health and Safety’](#), proved inadequate by the end of three years, the Government should impose statutory duties.

A [report done for the HSE](#) in June 2010 found that 39% of directors had *heard* of the guidance, 19% had *read* the guidance and the percentage taking action was 9%. This by anyone’s standards is inadequate.

Our Priority: Ensure that companies and their directors are adequately held accountable for putting lives at risk

Occupational disease

Headline figures on work related deaths in Scotland appear to show that 25-30 people die each year through work. – painting a totally false picture of the real situation. This figure neglects completely the much higher numbers who die each year from occupational diseases including cancer and coronary heart disease. The real figure dying each year in Scotland through work is in the thousands. **Work related injury, ill health and death is a major public health issue** and should be treated as such. The Scottish Parliament should openly acknowledge this reality and prioritise action to address it.

Background

Statistics on levels of occupational health are contested. However, the fact that the scale of occupational ill health is unacceptable is not.¹

The [TUC \(2010\)](#) review of research evidence indicates that in the region of 15,000 people die each year from cancers caused by work (UK). This is supported by Professor Andrew Watterson of Stirling University who has estimated that there are in the region of 1800 work related cancer deaths per year in Scotland.

In addition, the TUC highlight 4,000 deaths from other lung disorders such as chronic bronchitis and emphysema caused by breathing in fumes, chemicals and dusts.

There is also growing evidence of a clear link between work and death from cardiovascular disease. Even if only 5% of these deaths were work related this would be 7500 per year. However In 1991, Danish ² statisticians calculated that work factors could account for 16 per cent of early deaths from heart disease in men and 22 per cent in women. More recently other studies reached a similar conclusion, with one 2002 British Medical Journal³ study showing workers in stressful jobs are more than twice as likely to die from heart disease.

The TUC concludes from the research that at least 20,000 people die annually through work but states that the real total could be double that.

¹ The fact that data is faulty is also unacceptable. The 2008 report of the House of Commons Select Committee found that *We are concerned that HSE is struggling to cope with its occupational health remit. It admits to basing its occupational health policy on an incomplete data source and is failing to meet its occupational ill health targets*, and calls on the HSE to take urgent measures to address this.

² O Olsen and TS Kristensen. *Impact of work environment on cardiovascular diseases in Denmark*, Journal of Epidemiology and Community Health, volume 45, pages 4-10, 1991

³ Kivimaki and others. *Work stress and risk of cardiovascular mortality: prospective cohort study of industrial employees*, British Medical Journal, volume 325, page 857, 2002.

In Scotland this translates to a *minimum of 2000 deaths per year due to occupational injury and disease*. Compare this to the most recent Scottish Government figures for:

Deaths: Homicide	78
Deaths: Road Traffic accidents	270

Our Priority: **Recognise occupational injury, ill health and death as a major public health issue**

Toxics Use Reduction Strategies

Prevention is the first priority. The Scottish Parliament should reduce worker and community exposure to harmful toxins by adopting a **Toxics Use Reduction strategy** similar to that enacted in Massachusetts, USA.

Background

In 2008, Professor Andrew Watterson, head of the Occupational and Environmental Health and Safety Research Group at Stirling University, called on the Scottish Government to introduce a toxics use reduction strategy. The Scottish Hazards Campaign and the STUC echo that call. This is a proven approach used in parts of both the [USA](#) and [Canada](#) to reducing risk from occupational and environmental exposure to toxins that cause cancer and other ill health. Toxics use legislation would require manufacturers to prepare pollution prevention plans, but would also provide assistance to them in complying, improving health and safety, reducing waste and creating ‘greener’ products. For a discussion of the effectiveness of this approach in Massachusetts see [2002 research](#)

Our Priority: **Adopt a Toxics Use Reduction strategy**

Occupational Health Services

Occupational health service provision in Scotland (and throughout the UK) ranks amongst the worst in Europe. We welcome the initial steps that have been taken in Scotland with the establishment of the Scottish Centre for Healthy Working Lives and the Working Health Services initiative. These must be protected and expanded. The Scottish Parliament should work toward the establishment of a **comprehensive Occupational Health Service within the NHS**, ensuring access to all working people.

Background

Traditionally the UK has neglected the ‘health’ in health and safety, and even now, going into the 21st century, the provision of occupational health services is woefully inadequate. HSE figures indicate that two thirds of working people in the UK have no access to occupational health expertise and support, and a study undertaken by the Institute of Occupational Medicine for the HSE found that only 3% of UK companies provided all the key elements of occupational health

support. ([Pilkington, 2002](#)) The UK situation compares badly with Europe, where in some Nordic countries coverage nears 100%.

Within European law, The Framework Directive (89/391) requires that all workplaces should have preventive occupational health services. This in turn is based on the International Labour Organisation Convention 161. The UK has yet to ratify this convention which requires ratifying countries to formulate and implement a coherent national policy on OH services, and to progressively develop OH services for all workers. Many would also argue that the UK has also failed to comply with the European Framework Directive requirements on occupational health. The HSE has brought a prosecution (Dundee Council 2006) because it did not provide access to OH services. This prosecution was based on regulation 5 of the Management Regulations which says that ‘employers should make arrangements to manage effectively health and safety’ (for further information see the [STUC](#))

The Global Strategy on OH for All (WHO, 1995) describing how OH services contribute towards sustainable development, environmental protection and the overall protection of the working population from work-related ill-health, injuries, and accidents at work, stated that all workers should have access to OH services. (This strategy has been most recently updated with a [Global Plan of Action on Workers’ Health 2008- 2017](#))

In relation to OH services, the Scottish Hazards Campaign welcomes the establishment by the Scottish Government of the Scottish Centre for Healthy Working Lives and in particular the new pilot [Working Health Services Scotland](#) rehabilitation services. However, this provides only one of the key elements of an OH service to only some workers and is therefore only a first step toward addressing Scotland’s totally inadequate OH service provision.

Models for good OH Services are not hard to find. See the [STUC](#) for a full discussion of OH in Scotland

Our Priority: Work toward a comprehensive NHS based Occupational Health Service

Trade Union Health and Safety Representatives

It is known and acknowledged by the HSE and both Governments that workplaces with active trade union health and safety representatives are 50% safer. Yet, the statutory rights of those representatives to time off for H&S duties, to education and training, to inspect the workplace, are not effectively protected. The Scottish Parliament should work to protect and enforce these rights.

With further devolution, the Scottish Parliament could strengthen the role of trade union H&S representatives through the introduction of **PINS (provisional improvement notices)** and extend their work by enabling the development of **roving safety representatives**. This could be particularly important at a time of cuts when the use of temporary, non unionised workforces will increase.

Background

There is overwhelming evidence of the positive health and safety effect of good trade union organisation. Some of this is given in the table below. For more information see [The Union Effect](#)

<p>"Organised labour has been the essential factor central to most workplace health and safety improvements, from the industrial revolution to the present." (Abrams, 2001)</p>	<p>"In workplaces with full recognition and a joint management-union safety committee serious accident rates were less than half those at firms with no union recognition and no joint committee." (Reilly, Paci and Hall, 1995)</p>	<p>"HSE supports the vital contribution health and safety representatives and trade unions make to maintaining and improving health and safety in the workplace. HSE places great importance on worker involvement and consultation, which has proved to be key factor to improving health and safety in the workplace." HSE Worker Involvement</p>
<p>"Studies in industrial countries indicate that the role of labor unions in ensuring compliance with health and safety standards is often an important one." (World Bank, 1995)</p>	<p>'The proportion of employees who are trade union members has a positive and significant association on both injury and illness rates.' Robinson and Smallman, <i>The Healthy Workplace?</i> Judge Institute of Management Studies, 2000</p>	<p>'There is good evidence that workplaces with properly involved unionised safety representatives generally achieve better performance' HSE (2009) The Health and Safety of Great Britain: Be part of the solution</p>

Roving Representatives and PINs

Given this clear evidence, the Hazards Campaign and others have consistently campaigned for better enforcement of the rights Health and Safety Representatives already have, but also an extension of those rights.

A PIN is a Provisional Improvement Notice. This would give a H&S Rep the right to issue a notice to the employer of action needed to comply with H&S law In Australia these are already in force, have led to increased compliance and are broadly supported by both sides of industry and the government.

The idea of a roving representative is that a H&S representative would be able to represent not only his or her own members, but people working for another employer in the same workplace or people working in different workplaces. In some places this has already been negotiated, but there is no clear legal right for such roving representation. It would be of particular importance for small businesses where it might be impossible to have trained and experienced rep for each workplace. There is evidence from the UK and elsewhere that such arrangements can be effective. For further information, see [Hazards Magazine](#)

Our Priority: Protect and strengthen the rights and work of trade union H&S representatives

Scottish Hazards Centre

A Scottish Hazards Centre would build on the effective role trade unions have played in reducing incidences of occupational ill health in unionised workplaces. It would be a front line service, providing advice, information and support services for individual workers and groups of workers in Scotland *who are not unionised*, who do not have access to OH&S expertise, with particular emphasis on those most exposed to risks, including: workers in hazardous industries and their local communities; those in unorganised workplaces; those working in SMEs; those new to work (and young workers); those with disabilities; older workers; home and agency workers; those living in areas of deprivation; those from ethnic minority communities; migrant workers and refugees; those working in the voluntary/community and social enterprise sectors. The evidence is that if these workers gain knowledge and are supported in raising issues/taking action their employers will also benefit.

The Scottish Parliament should join with the Scottish Hazards Campaign and Scottish Trade Unions to promote and fund this front line service.

Background

A separate paper has been produced which puts forward the case for a Hazards Centre and details costs. Copies from the Secretary of the Campaign, Kathy Jenkins at kajenkins@blueyonder.co.uk.

Our Priority: **Fund a Scottish Hazards Centre**

International Workers Memorial Day

2010 saw the UK Government formally recognise 28 April, an international day of remembrance for those who have died through work and a powerful reminder of the need to protect worker H&S. The Scottish Government has also recognised the significance of this date. It is time for the Scottish Parliament to recognise, mark and promote awareness of this day and to encourage all Scottish Local Authorities to do the same. To this end an annual parliamentary event would show that we in Scotland are treating the right to be safe at work with the correct amount of importance and are willing to commit to making the changes that are required to help forward the core message of IWMD – **Remember the Dead and FIGHT FOR THE LIVING.**

Our Priority: **Recognise and promote International Workers Memorial Day**