

Harm Reduction Action Plan

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Foreword

WorkSafe's mandate is to contribute to, and promote, health and safety performance at work in New Zealand to ensure everyone who goes to work comes home healthy and safe. We use our education, engagement and enforcement levers to support our core roles of harm prevention, leadership of the health and safety at work system and regulatory effectiveness. We take an evidence based approach to target critical risks and engage with key businesses, stakeholders and agencies.

ACC aims to reduce the incidence and severity of injuries to improve the quality of life of workers in New Zealand. We concentrate our effort on working in partnership with businesses and stakeholders to target high-cost and high-volume injuries.

This joint Harm Reduction Action Plan is intended to support our agencies' coordinated investment and effort to work to our respective strengths and to complement our other activities. The Plan comprises a high level overview of ACC's and WorkSafe's focus areas aimed at preventing work harm in New Zealand.



Nicole Rosie

WorkSafe Chief Executive



Emma Powell

ACC Chief Customer Officer

About the Plan

The Plan is our framework for action on improving the health and safety of workers in New Zealand. Legislation* requires WorkSafe and ACC to have a workplace injury prevention action plan.

The Plan comprises ACC's and WorkSafe's focus areas aimed at preventing work harm in New Zealand irrespective of how they are funded.

The Plan is intended to support coordinated investment and effort to work to our respective strengths and to complement our other activities.

The Plan focuses on what will make the biggest impact to reduce fatalities and potentially fatal work injuries in New Zealand. It acts on the goals and priorities of the Health and Safety at Work Strategy 2018-2028, WorkSafe's strategy 2018-2022 and ACC's injury prevention strategy and priorities.

* s264A Accident Compensation Act 2001
s196 Health and Safety at Work Act 2015

Working together

The success of the Plan depends on collective action by government, businesses, sector and business leaders, unions and workers.

Our key partners include the Business Leaders' Health and Safety Forum, Business New Zealand, the New Zealand Council of Trade Unions and the Health and Safety Association of New Zealand.

ACC and WorkSafe roles

ACC and WorkSafe have complementary roles for harm prevention.

ACC

- Injury prevention programmes.
- Incentives to encourage health and safety improvement.
- Support for return to work.

WorkSafe

- Harm prevention focus areas.
- Leadership of the health and safety at work system.
- Provide regulatory effectiveness.

Target: At least a 25% reduction in work-related fatalities and serious injuries by 2020

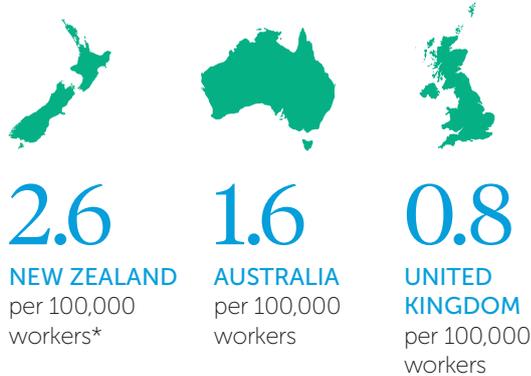
Fatal work-related injuries 2015-2017 average

2.1 fatal injuries per 100,000 worker full-time equivalents

36%  lower than 2009-2011 baseline average

The fatality rate data indicates an **improvement** against the baseline of 3.3 per 100,000 worker full-time equivalents.

Fatal work-related injuries international comparison 2016



New Zealand still **lags behind** international comparators for fatal work-related injuries.

Potentially fatal work-related injuries 2017

16.9 potentially fatal injuries per 100,000 worker full-time equivalents

11%  lower than the 2009-2011 baseline average

Overall the rate for potentially fatal injuries has trended **downwards** from the baseline years of 2009-2011, when it was 19.0 per 100,000 worker full-time equivalents. However it increased in 2017 compared to the previous year for the first time since 2010.

Work-related injuries resulting in more than a week away from work 2017

12.0 injuries with more than a week away from work per 1000 worker full-time equivalents

6%  higher than the 2009-2011 baseline average

The rate of week away from work injuries is **higher** than baseline, which was 11.3 per 1000 worker full-time equivalents, and is unchanged from the previous year.

Sources:

Stats NZ. (2018) Work-related injury targets at a glance: 2008-17.
WorkSafe New Zealand, customised report on international comparison of work-related fatality rates.

These injury targets cover around one-tenth of work-related harm. The majority of harm is the effect of work on health and early deaths from work-related exposures.

* Includes full-time and part-time workers.

Impact of work-related harm in 2017

Work fatalities - highest five sectors 2015-2017 average

Agriculture	13	Total all sectors 56
Transport, postal, and warehousing	9	
Forestry and logging	5	
Manufacturing	5	
Construction	4	

2/3 of all fatal incidents involved vehicles

Estimated work-related health deaths

750-900

Estimated work-related health hospitalisations

5,000-6,000

426 potentially fatal injuries

Potentially fatal injuries per 100,000 worker full-time equivalents
2015-2017 average

22.4	15.6
Māori	Total population

Work injuries with more than a week away from work - highest five sectors

Manufacturing	5670
Construction	4824
Agriculture	2667
Healthcare and social assistance	2406
Transport, postal, and warehousing	2250

Total all sectors

27,396

33% of these injuries were body stressing

1.35

million days of work lost in 2017 due to new work injuries covered by the accident compensation scheme in that year alone

Workers	Employers
53%	81%

Say that workers are always told how their views on health and safety have been considered

Sources:

Stats NZ, Serious Injury Outcome Indicators: 2000-17
Stats NZ, customised report and licensed by Stats NZ for re-use under the Creative Commons Attribution 4.0 International licence
Accident Compensation Corporation, customised report on number of days off work on compensation
WorkSafe New Zealand, System for Work-related Injury Forecasting and Targeting (mechanisms)
WorkSafe New Zealand, customised report on work-related health estimates
Nielsen. (2018) Health and safety attitudes and behaviours survey. Worker engagement and participation report 2017. (A report to WorkSafe New Zealand). Wellington, New Zealand.

Work injury prevention programmes

ACC and WorkSafe have developed a range of programmes and focus areas aimed at preventing work injuries in New Zealand.

These are focused on the sectors, risks, and supports and enablers that will have the greatest impact on reducing work harm.

SECTORS

1. Agriculture
2. Construction
3. Forestry
4. Manufacturing
5. Healthcare and social assistance

CROSS-SECTOR RISKS

1. Work-related health risks
2. Body stressing
3. Vehicle-related injuries

SUPPORTS AND ENABLERS

1. Incentives
2. Worker engagement, participation and representation
3. Workers with greater need

Sector focus areas

ACC and WorkSafe have five programmes and focus areas to reduce harm in specific sectors.

Agriculture

Why this sector? *Agriculture has the highest number of deaths by sector, with an average of 17 fatalities per year since 2011. There are more than 50,000 businesses in the agriculture sector, and over 90% have six employees or fewer.*

Top three prevention priorities *Vehicles, machinery and chemicals. Harm is often linked to inattention/fatigue, unsafe machinery, and lack of appropriate safety equipment.*

Action areas

- *Changing the on-farm culture to lead health and safety management.*
- *Normalising risk identification, assessment and management as part of everyday farm activity, through:*
 - *maintaining and growing awareness of the need to recognise and control risk*
 - *changing everyday behaviour by co-designing initiatives with farmers and working with health and safety partners who have greater access to or influence on farmers to help drive on-farm behaviour change*
 - *promoting the use of modified or different equipment to make work safer.*

Outcomes *A sustained reduction in the number of workers harmed in the agriculture sector.*
Increase in proportion of workplaces with effective worker engagement, participation and representation practices.

Lead agency *WorkSafe*

Construction

Why this sector?

In 2018, nine construction workers lost their lives and there were more than 37,000 injuries. Construction also has the highest rate and number of airborne exposure-related deaths of any sector in New Zealand.

Demand to build more houses and infrastructure faster, alongside the physical nature of the work and the conditions by which work is done increases the risk of injury.

Top three prevention priorities

Vehicles, falls from height, and airborne exposures.

Action areas

- *Support strategic planning and sustainable resourcing for sector leadership groups.*
 - *Work with Construction Health and Safety New Zealand to develop a more effective and efficient pre-qualification system.*
 - *Engage effectively through:*
 - *Worker engagement pilot projects*
 - *Changes to government procurement rules.*
-

Outcomes

A sustained reduction in the number of workers harmed in the construction sector.

Increase in proportion of workplaces with effective worker engagement, participation and representation practices.

Lead agency

WorkSafe

Forestry

Why this sector?

For serious injuries on a per worker basis, forestry is New Zealand's most dangerous sector. Over 100 workers are seriously injured and there are about five fatalities each year. Forestry is New Zealand's third largest export earner and directly employs about 8,000 people.

Top three prevention priorities

Being hit by moving objects, vehicle and mobile plant incidents, and slips, trips and falls.

Action areas

- *Focus on forestry principals and increase performance throughout the supply sector chain.*
 - *Explore how existing and new regulatory activities can support the sector to identify harm reduction improvements.*
 - *Develop effective approaches to facilitate behaviour change in high-risk forestry areas.*
-

Outcomes

A sustained reduction in the number of workers harmed in the forestry sector.

Increase in proportion of workplaces with effective worker engagement, participation and representation practices.

Lead agency

WorkSafe

Manufacturing

Why this sector? *Manufacturing has five fatalities on average and 4,528 severe injuries per year. The sector employs about 245,000 people. The highest injury rates are in the following manufacturing sub-sectors: food and beverage, fabricated metal products, wood and paper processing, non-metallic mineral products, transport and equipment manufacturing.*

Top three prevention priorities *Body stressing, vehicles and mobile plant, and being caught and trapped in machinery.*

- Action areas**
- *Support development of strong health and safety leadership in the manufacturing sector.*
 - *Support targeted industry-led initiatives to address the high level of harm in the meat sub-sector.*
 - *Work with the priority sub-sectors to confirm risks and support sector-led co-design of health and safety initiatives.*
 - *Support this sector with greater worker engagement, participation and representation.*
-

Outcomes *A sustained reduction in the number of workers harmed across the priority manufacturing sub-sectors.*
Increase in proportion of workplaces with effective worker engagement, participation and representation practices.

Lead agency *WorkSafe*

Healthcare and social assistance

Why this sector? *Nine percent of injuries that keep people away from work occur in this sector. The highest levels of injury are in four sub-sectors: hospitals, aged care residential facilities, home and community care services, and road ambulance services.*

Top three prevention priorities *Body stressing (moving and handling people), slips, trips and falls, and violence.*

- Action areas**
- *Target risks related to patient handling in the four priority sub-sectors.*
 - *Strengthen health and safety leadership (including in ACC's own contracting of third party suppliers for ACC claimants).*
 - *Target slips, trips and falls.*
 - *Work with sector leaders to understand and address the risk of violence.*
 - *Embed activities from other programmes as they are developed.*
-

Outcomes *A sustained reduction in the incidence and severity of work injuries across the sector.*

Lead agency *ACC*

Cross-cutting risk focus areas

ACC and WorkSafe have three programmes or focus areas aimed at reducing harm from risks that are common across sectors.

Work-related health

Why this risk?

At least ten times as many people die each year of a work-related health condition (estimated 750-900) as from a safety incident and many more develop ill-health as a result of their work (estimated 5,000-6,000 hospitalisations a year).

Action areas

- *Design and implement interventions for five priority work-related health risks:*
 - *noise at work*
 - *psychosocial*
 - *carcinogens*
 - *musculoskeletal*
 - *Impairment.*
 - *Increase awareness of work-related health risks and measures to reduce exposures.*
 - *Build organisational and workforce capability and capacity in work-related health.*
 - *Build capability in data and measurement.*
-

Outcomes

Fewer people experience work-related ill-health.

Lead agency

WorkSafe

Body stressing

Why this risk?	<i>Body stressing injuries represent the most significant mechanism of harm across all sectors. In 2017 there were 9,600 body stressing injuries resulting in more than a week off work and ACC paid close to \$69 million in entitlements. Over 70% of employers and nearly 80% of workers across the five sectors report that 'body wear and tear' is a risk faced by workers in their sectors.</i>
Action areas	<ul style="list-style-type: none">• <i>Develop a system-wide strategy that considers a wider set of risk factors and the preventive role of injury management practices.</i>• <i>Trial interventions based on a participative ergonomic approach across businesses at risk.</i>• <i>Increase the use of effective practices to manage the risk factors for body stressing injuries.</i>
Outcomes	<i>A sustained reduction in the incidence and severity of body stressing work injuries across sectors</i>
Lead agency	ACC

Vehicle-related injuries

Why this risk?	<i>Vehicles are used in every sector in a diverse range of on and off-road environments – yet working in or around a vehicle puts workers at a higher risk of injury and harm. Each year over 900 people sustain serious injuries while working in or around vehicles with an approximate cost to ACC of \$200 million.</i>
Action areas	<ul style="list-style-type: none">• <i>Complete research to fully understand vehicle harms and associated risk factors.</i>• <i>Design and implement harm interventions that target vehicle harms.</i>• <i>Support development of strong health and safety leadership in higher risk sectors.</i>• <i>Build strategic relationships across the transport, postal and warehousing sector to support ongoing initiatives that will reduce harm.</i>
Outcomes	<i>A sustained reduction in the number of workers killed or injured while working in and around vehicles.</i>
Lead agency	WorkSafe

Other focus areas that support or enable health and safety

ACC and WorkSafe have three other programmes and focus areas that support or enable businesses to improve the health and safety of workers in New Zealand.

Incentives

Why this focus?

Effective incentives encourage people to adopt and maintain behaviours at work that reduce the risk of work injuries. Incentives can stimulate the development of new solutions to known health and safety problems.

Action areas

- Offer work injury prevention subsidies to encourage uptake of effective health and safety solutions.
 - Offer work injury prevention grants to encourage new solutions to known health and safety problems.
 - Improve the use of performance-based programmes to incentivise people at work to improve their health and safety.
-

Outcomes

- Increased uptake of effective work health and safety solutions.
 - Sustained reduction in the incidence and severity of work injuries.
-

Lead agency

ACC

Worker engagement, participation and representation

Why this focus?

Effective worker engagement, participation and representation helps create work cultures that support good health and safety practices, and business performance.

Action areas

- *Co-design and pilot worker engagement, participation and representation initiatives with businesses and unions in a cross-sector approach.*
 - *Understand market segments and investigate effective communication channels to reach workers and businesses.*
 - *Understand the health and safety representative pool, including the accessibility and quality of training and support.*
 - *Examine barriers and preferred forms of worker participation from the experience of workers, and specific groups such as small to medium enterprises.*
 - *Identify a set of measures to evaluate progress.*
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Outcomes

Increase in the proportion of workplaces with effective worker engagement, participation and representation practices.

Lead agency

WorkSafe

Workers with greater need

Why this focus?

A priority of the Government Health and Safety at Work Strategy 2018-2028 is workers with greater need. These include Māori and other workers at greater risk such as Pacific Peoples, migrant and seasonal, younger and older workers.

Māori work fatality rates are 19% higher by industry and 10% higher by occupation than for non-Māori.

Action areas

- *WorkSafe will build strategic relationships and will develop effective system-level leadership approaches to improve the health and safety outcomes for workers with greater need.*
 - *Support better system coordination.*
 - *Better understand the drivers of risk for workers with greater need.*
-

Outcomes

A sustained reduction in the incidence and severity of work injuries for workers with greater need.

Fewer workers with greater need experience work-related harm.

Lead agency

WorkSafe

Turning action into outcomes

How is the Plan funded?

Funding comes from levies paid by employers and the self-employed.

ACC funds its programmes from the ACC Work Account.

Up to \$15 million per annum is transferred from the ACC Work Account to WorkSafe under a Partnering Agreement to invest in work harm prevention focus areas and activities.

In addition, WorkSafe funds activities such as engagement, education and enforcement from its Appropriation. This is set by Government using the Working Safer Levy collected by ACC on behalf of the Ministry of Business, Innovation and Employment.

How will we know the Plan is working?

Decisions to invest in new activities or to change or improve a programme are based on consideration of evidence and impact.

How the health and safety at work system is performing will be measured by the system performance framework that is being developed under the Health and Safety at Work Strategy 2018-2028.

Injury prevention funding under the Partnering Agreement will reduce the incidence and impact of work injuries and work injury claims including a reduction in Work Account costs and levy rates.

Oversight of the Plan's implementation and management is part of the ACC and WorkSafe Partnering Agreement.

What's on the horizon

What will be different about future revisions of the Plan?

Future revisions to the Plan are likely to include identifying new focus areas as our approaches mature. WorkSafe and ACC will refresh the Plan by 2022 or earlier.

For example, it may include programmes that support vulnerable workers or target higher-risk occupations, or business groupings in regions or supply chains, and a catastrophic harm prevention approach.



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