

Work-related injuries and ill health statistics for the construction industry

- In 2016-17 there were 30 fatal injuries to workers (30% lower than the five year average of 43 for 2011-16). There were also four fatal injuries sustained by members of the public.
- The worker fatal injury rate in 2016-17 was 1.37 per 100,000 workers (over three times the average rate across all industries of 0.43 per 100,000 workers).
- There were 5,055 reported non-fatal employee injuries in 2016-17. Reported non-fatal injuries are categorised as either specified (a pre-defined list of certain injury types, for example fractures, amputations and serious burns) or injuries resulting in over seven-days off work.
- In 2016-17 there were 1,844 specified injuries: falls from height accounted for 32%, slips, trips or falls on the same level for 29%, being struck by an object 14%, lifting and handling injuries 7% and other causes 18%.
- In 2016-17 there were 3,211 over seven-day injuries: lifting and handling accidents accounted for 29%, slips, trips or falls on the same level for 21%, falls from height 10%, being struck by an object 12% and other causes 28%.
- Annually, around 80,000 workers suffer from an illness they believe was caused or made worse by their work. Around 40% of these cases are new conditions (occurring or developing in the last year), while the remainder are long-standing conditions (over 12 months old).
 - 52,000 were cases of musculoskeletal disorders (MSD), of which just under 33% were new conditions
 - 12,000 were cases of stress, depression or anxiety, of which around 60% were new conditions
 - 16,000 were cases of other illness (such as skin or respiratory conditions), of which around 40% were new conditions.
- Around 2.3 million working days are lost each year.
 - Work-related musculoskeletal disorders account for 1.2 million.
 - Work-related stress, depression or anxiety account for 0.4 million.
 - Workplace injuries account for 0.4 million.
 - Other work-related illnesses account for 0.3 million.



It is estimated that, across all industries, just under a half of all reportable non-fatal injuries to employees are actually reported.

Breathing and lung problems

- Annually, between, 2016-17, around 3,000 workers were suffering with breathing and lung problems they believed were caused or made worse by their work, equivalent to 0.14% of workers. This rate is significantly higher than the 0.08% for workers across all industries.
- When asked about exposures contributing to their illness or condition, almost 20% of workers reporting with work-related respiratory problems identified dusts from stone, cement, bricks or concrete.

Occupational cancer

- Occupational cancer burden research indicates past occupational exposure to known and probable carcinogens is estimated to account for about 5% of cancer deaths and 4% of cancer registrations currently occurring across sectors each year in Great Britain. This equates to about 8,000 cancer deaths and 13,500 new cancer registrations annually (registrations include cancers that may be non-malignant, such as non-melanoma skin cancer).
- Of the estimated 8,000 occupational cancer deaths, the construction industry had the largest number (3,500). The majority of these cases were caused by past exposure to asbestos (2,600) and silica (450). These two carcinogens are associated with lung cancer and mesothelioma.
- Of the estimated 13,500 occupational cancer registrations, the construction industry had the largest number (5,500). The majority of these cases were caused by past exposure to asbestos (2,800) and silica (700), but also diesel exhaust emissions (200), solar radiation (800) and coal tars and pitches (500), mostly causing non-malignant skin cancer.
- Mesothelioma, contracted through past exposure to asbestos, killed 2,542 people in 2015, a similar number to the previous three years. The latest projections suggest that there will continue to be around 2,500 deaths per year for the rest of this decade, before numbers begin to decline.
- Research suggests there are currently as many lung cancer deaths attributed to past asbestos exposure each year as there are mesothelioma deaths.

Skin disease

- Data on new assessments for industrial injuries disablement benefit (IIDB) suggest an elevated incidence of contact dermatitis for workers, whereas reports from dermatologists participating in a surveillance scheme for occupational skin disease suggest the incidence is similar to that for all industries. However, reports suggest that certain specific construction-related occupations may have a higher incidence, particularly bricklayers and masons, and painters and decorators.
- A substantially elevated risk among bricklayers and masons was clearly seen prior to 2008, which is likely to have been due to the presence of chromates in cement. A recent analysis of trends in cases attributed to chromates suggests that this risk may now have been substantially reduced following EU restrictions on their use.

Other conditions

Other conditions giving cause for concern are occupational deafness (sometimes referred to as noise-induced hearing loss) and hand-arm vibration syndrome, which is largely made up of two conditions (vibration white finger and carpal tunnel syndrome). The main source of information on both of these conditions is from new claims from the IIDB scheme. The relative frequency of new IIDB assessments for these conditions is higher for workers in construction than most other sectors.



For further information refer to the HSE health and safety statistics webpages.