



COUNCIL OF TRADE UNIONS

## **Election 2002 Fact Sheet #4**

# Health and Safety at Work

### **The cost of accidents is high**

New Zealand has an appalling record of workplace fatalities. More than 500 people die of work-related trauma or disease in New Zealand every year. The OSH recorded workplace fatalities for the 2001-2002 year are higher than at any time during the past decade. This year, the number of workplace deaths is double last year.

As well as the huge cost of pain and anguish to the families the monetary cost of not preventing workplace accidents and disease is estimated to be as high as 6-8% of our GDP i.e. up to \$10 billion per year.

### **The role of the law**

Despite popular myth, work accidents and disease do not generally occur because of apathy, carelessness or stupidity on the part of workers, but through unsafe and unhealthy systems, processes and tools of work.

This has been proven conclusively by international research, including an exhaustive survey of 2,000 accidents undertaken by the Institute of Industrial Psychology in the UK.

OSH legislation must therefore encourage employers and workers to develop and maintain safe and healthy systems of work in all workplaces, including proper knowledge, training and supervision.

### **The Health and Safety in Employment Act 1992**

The existing Health and Safety in Employment Act 1992 already provides a framework within which employers are required to identify workplace hazards and take all practicable steps to eliminate, isolate or minimise them.

The problem is that the Act has not been as effective as it should be because employers are not complying with it. Low fines under the Act (average of \$6200), and under-resourced and lax enforcement of the Act mean that many employers don't bother about it.

The amendment to the Act, promoted by the Labour Alliance Government, would have addressed these deficiencies by:

Providing rights to elected employee health and safety representatives to be involved in developing and maintaining safe systems of work, and to refuse dangerous work.

Allowing any person (family of a deceased worker) to prosecute under the Act if OSH decides not to.

Extending the coverage of the Act to include workers, like rail workers and aircrew, who are presently excluded.

Highlighting the fact that occupational diseases, including serious consequences of stress and fatigue, are potential hazards to be addressed by prevention strategies.

Increasing the maximum fines, and introduce a system of instant fines up to \$4000, to provide an incentive for employers (and employees) to comply with the Act.

The new laws are modeled on similar legislation in other comparable countries which have been more successful than New Zealand in reducing the toll of workplace accidents and disease.

It is worth noting that an OSH analysis of submissions on the Discussion Paper preceding this Bill showed that 72% of health and safety professionals thought increased fines would improve workplace health and safety, 88% supported instant fines, 73% supported additional measures to address workplace stress, and 67% thought anyone should be able to prosecute.

### **National and ACT oppose the HSE Amendment Bill**

National and ACT have opposed the HSE Amendment Bill on the basis that it will increase compliance costs for employers. ACT has repeatedly said that accidents are caused by workers' own carelessness and stupidity.

The Bill was not passed before the General Election was called. The Centre Left parties have confirmed that they will continue with the Bill if re-elected to Government.

### **Additional CTU policy objectives**

The CTU policy statement also sets out clear policy objectives including those set out below.

The establishment of a national tripartite OSH Commission with responsibility for national standard setting, enforcement, and advice to the Government on osh matters

The development of an effective administrative penalty rating system as an alternative to the existing system of criminal prosecution.

The development on a tri-partite basis through ACC of best practice injury prevention and health protection strategies with resourcing of tripartite safer industry projects to encourage best practice on an industry basis

The development and effective resourcing of the elected worker health and safety representative system with trained representatives having effective rights and roles in the development of best practice codes at industry level and the development and enforcement of safe systems of work at workplace level.