Health and safety: environmental health perspectives, priorities and service delivery

November 2021

CIEH
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About the Chartered Institute of Environmental Health (CIEH)

CIEH is the professional voice for environmental health representing over 7,000 members working in the public, private and third sectors, in 52 countries around the world. It ensures the highest standards of professional competence in its members, in the belief that through environmental health action people’s health can be improved.

Environmental health has an important and unique contribution to make to improving public health and reducing health inequalities. CIEH campaigns to ensure that government policy addresses the needs of communities and business in achieving and maintaining improvements to health and health protection.

For more information contact us on policy@cieh.org, visit www.cieh.org and follow CIEH on Twitter @The_CIEH.
Introduction

Local authorities (LAs), largely through their environmental health services, are responsible for enforcing workplace health and safety in two thirds of all business premises, employing around half of the total workforce in Great Britain.1 Predominately covering the retail, consumer services, hotel and catering, entertainment and warehousing/supply chain sectors, they have an important role in ensuring the effective and proportionate management of risks, supporting business, protecting their communities and contributing to the wider public health agenda. Environmental health professionals also work in the private and third sectors, managing health and safety, providing business critical advice and guidance.

The COVID-19 pandemic has highlighted the vital and wide-ranging role of environmental health professionals in keeping our communities safe and in supporting businesses. Throughout the pandemic, they have adopted a risk-based approach, prioritising work in connection with the COVID-19 response. This has meant diverting significant resource away from ‘business as usual’ activities and other work to protect local communities, including enforcement of new Health Protection Regulations.

The knowledge, skills, and competencies of environmental health professionals, particularly in health and safety and infection control, have helped local government through the pandemic, playing a critical role in response to the worst public health emergency in living memory.

As the country moves towards recovery, environmental health professionals will continue to play a critical health protection role, supporting growth in the local economy and providing a level playing field for businesses. They are well placed to support the Levelling Up agenda, helping local businesses to thrive and working with Directors of Public Health to improve the health of local populations.

The Health and Safety Executive’s (HSE’s) 2016 strategy Helping Great Britain Work Well is due for review. Whilst the scope of the review and timescales have not yet been confirmed, the Chartered Institute of Environmental Health (CIEH) surveyed its members and the wider environmental health profession working in health and safety to obtain their views about health and safety priorities and how LAs work with the HSE as co-regulators. This report sets out the findings of the survey.

The CIEH survey (Appendix 1) was launched in July 2021 and ran for approximately six weeks. It consisted of a series of open questions. A total of 92 responses were received from both members and non-members. 59 respondents work in the public sector/LAs whilst the remaining 33 respondents work in the private or third sectors, academia or are retired.

The survey findings, detailed in this report, have been shared with the HSE to help inform its early thinking in developing its future strategy. We will seek further views from environmental health professionals as more information about the scope of the HSE’s strategy review becomes available.

We are committed to engaging with our members and the wider environmental health profession to inform our response to any future HSE consultation on its strategy, ensuring that the voice of the environmental health profession is heard, and the co-regulatory model further strengthened and improved for the future.

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1 Statement of commitment between: Local Authority and HSE Regulatory Services, HSE website, last accessed 23 Nov 2021.
Summary of findings

In order to improve the delivery of health and safety regulation, environmental health professionals who participated in the survey, would like the HSE to:

- Work more collaboratively with LAs to identify national priorities for targeted interventions, including priorities relevant to LAs
- Together with LAs, develop options for a more sustainable funding model for health and safety work delivered by LAs
- Continue to work with LA leaders and develop links with the Association of Chief Environmental Health Officers Group, to ensure health and safety is afforded sufficient priority at a local level
- Review the Health and Safety (Enforcing Authority) Regulations 1998 in collaboration with local authorities, and, subject to a review of the benefits to businesses and regulators, reinstate joint warranting
- Explore how information on businesses can be better shared between central Government and LAs to facilitate more effective targeting of LA interventions
- Further improve support to LAs, by providing free or low-cost training, resources, information and development opportunities for authorised officers
- Improve LA access to Enforcement Liaison Officers (ELOs), building on the strong communications and joint working developed during the pandemic
- Further develop and expand the information and resources available to LAs to include more specialist areas and improve the accessibility of HELex

LAs as co-regulators have a responsibility to adequately resource health and safety services. Taking the responses together, the following actions have been identified for LAs:

- Ensure that adequate resources are allocated to health and safety regulation at a local level
- Raise the profile of health and safety at work at a local level by including it as a corporate priority in protecting the health and wellbeing of citizens

As the professional membership body for environmental health we will:

- Improve the availability of low-cost health and safety training
- Set up a regular online networking event for our members to discuss topical health and safety issues
- Continue to work with our accredited universities to promote a career in environmental health as part of our #ChooseEnvironmentalHealth campaign

In terms of future priorities for health and safety and the HSE’s future strategy, respondents to the survey highlighted the following areas:

- Small employers and small businesses should continue be prioritised for health and safety support, with the development and promotion of specific resources, tools and information, which are easy to understand and aimed at improving health and safety knowledge and compliance
- The new and fast-changing world of work should be a key pillar in the new strategy, including new ways of supporting and protecting people who are working remotely, those part of the gig economy, are self-employed and lone workers
- Public health is intrinsically linked to health and safety, therefore better links should be established between HSE and the public health community to achieve the shared goals of protecting people from ill health and improving wellbeing
- There was some support for HSE spot checks at LA enforced businesses to be expanded beyond COVID-19 and become a permanent feature in the future, but subject to a review of the operation of the scheme in partnership with LAs.
Resources for health and safety

Great Britain’s health and safety record is the envy of much of the world. HSE and LAs are jointly responsible for enforcing health and safety legislation. Together, they ensure that dutyholders manage the health and safety of their workforce and those affected by their work.

An effective regulatory system, which affords protections to workers and members of the public and reduces the risk of accidents and ill health linked to work, is dependent on the availability of adequate resources for regulators and a competent workforce. Post pandemic, the advice and support provided to small and large businesses on how they can operate safely and effectively, is essential to rebuilding a sustainable economy, supporting the workforce and keeping people safe.

However, funding for health and safety work has been tightened in recent years. HSE’s Business Plan for 2021/22 shows that they have found over £100m of savings since 2010, through the reduction of running costs and generation of income, due to reductions in funding from central government.2

According to the LGA, in the decade to 2020, core funding to LAs from government reduced by nearly £16 billion, a loss of 60p out of every £1 provided to spend on local services.3 Further, Councils in England face extra cost pressures of almost £8 billion by 2024/25 just to keep vital local services running at pre-pandemic levels.4

LA resources for health and safety regulation have reduced significantly over the past decade, with the number of officers enforcing workplace health and safety falling from 895 to 455 FTEs between 2011/12 and 2019/20 in Great Britain.5 This is a reduction of 440 FTE posts or 49% in 8 years. Unchecked UK estimated that environmental health resources have dropped by 32% between 2009 and 2019, suggesting that the cuts have impacted on health and safety resources to a greater extent than on other services.6

The lack of resources and how this could be addressed were central messages emerging from the survey from both LA respondents and practitioners working in the private sector.

Respondents advised that resources are lacking at both national and local levels, including resources for the HSE to operate effectively. They mentioned “Insufficient resources for HSE to take on referrals from/ liaise with local authorities”, for example.

LA respondents were concerned that limited resources are potentially contributing to worsening standards and outcomes. Whilst overall LA resources are likely to remain constrained, respondents highlighted the disproportionate impact of cuts on health and safety compared with some other regulatory areas.

“ Some of the project work gets sidelined due to major incidents coming in. There are not the resources to deal with both.”

“ No specific project work for in excess of 4 years due to lack of resources [which are] redirected to Food for example and low risk premises despite issues and intel indicating projects should occur e.g. violence in retail (more apparent during COVID); beauticians and hairdressers etc.”

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2  HSE Business Plan 2021/22, HSE website, last accessed 23 Nov 2021
3  Local government funding: Moving the conversation on, LGA, 2018.
4  Local services will cost at least £8bn more by 2024, which cannot be funded by council tax alone, LGA press release 1 October 2021
5  Data collection – analysis of LAE1 2019/20 data from Local Authorities, HELA paper, Health and Safety Executive, March 2021.
6  The UK’s Enforcement Gap 2020, Unchecked UK, October 2020
“We cannot cover the national issues in the code or local issues identified needing an intervention. There is too much reactive work to undertake. Standards appear to be falling after a number of years where visits have significantly decreased.”

“[...] 57% of respondents wanted to see HSE adopt a similar approach to the Food Standards Agency (FSA), providing greater scrutiny of LA performance, or to introduce health and safety inspection targets for LAs. 41% wanted to see the registration or licensing of new businesses, similar to the way food businesses are required to register prior to opening.

Whilst ring-fencing of resources is very unlikely to happen, it is clear that respondents want to see health and safety work afforded higher priority at a local level. Many respondents remarked that the FSA’s approach has helped to protect resources for food safety, whereas health and safety resources have been reduced.

Registration of businesses was also seen by some as being useful for better targeting of local activity and inspections, especially at new businesses. Whilst registration could be onerous for businesses, there may be other ways of improving LA access to information on businesses operating in their areas. Since the pandemic, a wealth of data has been collected by central government for the furlough scheme, support for small businesses and the self-employed. There are also existing datasets used by HMRC for the purposes of taxation, for example. This data should be shared with LAs to provide better insight into businesses operating in their areas. Toolkits could be developed for LAs to help them identify and harness these data sources in their work.
Respondents consistently reported that food safety is afforded more priority than health and safety, absorbing the limited resources available to LA regulatory services. This is almost certainly because of the greater scrutiny of this function. Respondents also stated that LAs may need specific targets or incentives in order to visit more premises and ensure that good local intelligence is maintained.

“Poor enforcement in LA sectors due to funding cuts – lack of LA focus on H&S enforcement due to focus on areas, which are more regulated by external bodies (eg food safety, FSA audits LA provision)”

There were calls for HSE to exert a “greater influence on LA leaders to ensure adequate ring-fenced resource for health and safety inspectors.” There were also calls for more joined-up working between HSE, LAs and other stakeholders to ensure that health and safety at work is given a bigger and more positive profile.

“HSE and LAs need to create a more combined perspective through better communication …, through a joint approach to make it easier for the public and businesses to understand H&S legislation and standards.”

Adequate resourcing of LA health and safety services was cited as a key benefit to businesses and economic recovery following the pandemic. Businesses could receive the provision of better support, advice and information, which would allow them to operate more safely in compliance with their duties. This is especially important for smaller businesses who might struggle to afford external expert advice.

“Businesses would get free advice on compliance & the tools to achieve it, which they could rely on, requirements would get enforced, there would be a more level playing field & no commercial advantage to non-compliance”
Proactive inspections and impact of COVID-19

Many respondents stated that they were unable to undertake proactive inspections of businesses in their areas. The lack of proactive inspections in recent years seems to have had an impact on the level of local intelligence available to local regulators and also on the standards of health and safety within businesses. Some respondents advised that they were seeing more severe injuries due to reductions in proactive inspections of businesses over the past decade.

“The limitations of routine work mean that we now do not know much about the businesses in our borough”

Some respondents thought that HSE’s approach prevented them from carrying out proactive inspections locally:

“The restrictions on LAs’ ability to decide where and when to visit should be removed, and they should be free to target local OHS priorities. HSE and LAs need to maintain positive input to support business and organisations, with sufficient resources to provide independent oversight of organisations’ compliance, and effective enforcement.”

On a positive note, respondents advised that the inspections taking place to enforce COVID-19 controls have led to an increase in local intelligence, provided the opportunity to offer businesses general health and safety advice and uncovered poor practices that would otherwise not have been identified.

“The recent requirement for duty holders to assess risk and implement control measures relative to the potential spread of sars-CoV-2 has highlighted the inability of many SMEs to identify, evaluate and prioritise risk.”
The National Local Authority (LA) Enforcement Code is seen as being a barrier by some LA practitioners:

“LA premises have not been inspected for a number of years and standards have deteriorated massively and so COVID has facilitated visits into premises where National Code would not have permitted.”

Other respondents suggested that more national priority areas, underpinned by evidence, would be helpful from HSE, so that local areas could focus on the delivery of projects.

“An increase in the range of national priorities with some of the initial research and setting up work done on our behalf so we can aim resource at delivery.”

“I dealt with 3 serious life changing incidents involving deep fat fryers and all successfully prosecuted through Crown Court. Suggested to HSE that deep fat fryers be a subject of concern never received either an acknowledgement or any interest.”

Taking these responses together, there appears to be a need for a more joined-up approach to setting national priorities. This could be done in a more collaborative way between HSE and LAs as co-regulators, in order to identify a system that works well for both partners and covers priority areas in a variety of businesses and premises.

HSE and LAs working together and the split in responsibilities between LAs and HSE

Complex investigations requiring subject specific expertise can be challenging for LAs. LA respondents highlighted the importance of a close working relationship with HSE’s ELOs. The advice and support provided on specific issues were found to be very useful.

“The ELO role is essential as a point of contact for any H&S issue.”

There was a consensus that collaboration and communication between the HSE and LAs had improved during COVID-19. LA respondents found the webinars and briefings during the pandemic to be extremely helpful and wanted to see these continued. More two-way communication would allow more seamless working, and a better joined-up approach towards businesses, allowing for a clearer understanding of health and safety legislation and standards.

However, respondents believed that joint working between HSE and LAs could be improved with increased ELO capacity and accessibility. Some respondents called for more resources for ELOs.

“Sometimes it has been immensely difficult to contact anyone at the HSE.”

“[We have] a designated ELO but they have been extremely busy so are not always able to support when required.”

There were strong calls from many respondents for more joint working and joint inspections between LAs and HSE. Some respondents called for a return

7 National Local Authority (LA) Enforcement Code, HSE website, last accessed 23 Nov 2021.
to joint warranting to enable LAs to respond promptly to dangerous situations that arise locally.

“ When we were joint warranted, we had training and stronger connections with HSE staff, and able to respond in our boroughs to a situation of imminent danger.”

Fee for Intervention (FFI) used by HSE to recover costs of enforcement was seen as a barrier to more joined up working and the loss of flexible warranting identified as a missed opportunity for dealing with matters of imminent risk.

“ HSE have an intelligence, risk-based approach to work. FFI has hindered joint working (joint warrant) possibilities, which was very effective in [our LA] for sharing resources and maintaining competence for LA staff.”

“ More flexibility in the enforcement of health and safety between HSE and LA, with review of Enforcing Authority Regs – Consider bringing back flexible warrants to deal with matters of imminent risk.”

“ Staff competence and confidence has declined since joint working ceased.”

Respondents made a number of suggestions when asked about the split of regulatory responsibilities between HSE and LAs. Many respondents were of the view that the Enforcing Authority Regulations need to be revised, simplified and clarified in order to reduce overlap and remove splits in enforcement that add to the regulatory burden for both regulators. This was particularly cited for areas of cross regulation for HSE and LAs within the same premises. A focussed project to review HSE/LA respective responsibilities should be undertaken with the aim of re-allocating responsibilities, as appropriate.

“ A lot of time can be spent working out who is the enforcement body, sometimes this is more of an inconvenience, but in matters such as a fatality or urgent issue it can cause unnecessary delays in investigation.”

Despite a number of respondents saying that given the scarcity of LA resources, no additional responsibilities should be transferred to LAs, there were a number of areas that respondents felt would sit better with LAs, if resources were made available. This is particularly the case where responsibility is split between HSE and LAs for one premises or workplace. These include:

- Gas safety in domestic settings – Whilst gas safety is enforced by HSE, complaints are often received by LAs. Private sector housing teams in LAs also deal with all other aspects related to housing safety including electrical safety, fire and other safety aspects of individual dwellings.
- Home-based and mobile beauty and special treatments providers – these practitioners are regulated by HSE but LAs regulate all other beauty premises.
- Events – dual enforcement of events is seen as problematic by some LAs
- Common parts within commercial premises

Confusion and delays seem to occur when both regulators have responsibilities for different aspects of the same business or premises. Whilst this approach may be appropriate if aspects of the business are highly technical and need specialist input, this also has the potential to cause confusion for the business owner and cause delays in investigation. Respondents suggested that it might be useful to review the split in responsibilities:

“ Leaving it to main activity for the premises rather than excepting some activities to HSE within a LA enforced premises e.g. fairground rides, filming etc. on LA enforced premises.”

Other areas were mentioned which could be streamlined to be regulated by a single regulator:

- Infectious diseases related to animal-based premises (e.g. all visitor attractions, open farms, zoos, etc)
Training and availability of skilled and competent professionals

There was a strong message coming through from the responses that HSE should provide more training for LA officers, especially on more specialist areas. With reductions in resources to undertake health and safety-related work at LA level, some respondents thought that officers would benefit from refresher courses that cover wider areas of health and safety.

"It would be good to get more in-depth training on specific areas like we did when specific projects were run."
“Improved training (including refresher training) for LA officers would enable them to better protect workers & others in the LA regulated sectors.”

There were some specific asks from respondents such as:

“A HSE training package would be beneficial for all LAs on what to look out for, what is acceptable and what isn’t in, what evidence the HSE would require to be collected to pass on for HSE enforcement.”

“Specifically training and guidance packs on LAC67/2 ‘list’ when it comes out.”

Some respondents mentioned the difficulties faced when trying to recruit experienced and competent officers. This is consistent with the findings of CIEH’s recently published workforce survey.8

“Lack of suitably qualified, experienced and competent enforcement staff. Competing demands between public health issues such as Covid-19 and traditional safety issues. Both are core local authority functions.”

Sharing of information

Many respondents from both the private and public sectors were positive about HSE’s overall approach, resources and information:

“HSE’s approach is great, partnership working, training, website, support materials.”

HELex was also considered to be a good way of sharing information with LAs. However, the website is in need of an update, with a more user-friendly interface for LAs. There were also suggestions for better communication between LAs and HSE:

“They could use HSE bulletins / special bulletins to communicate with LAs so not only to update them but ask if they need training on any issue or if they need further advice or have any question to contact the Hub.”

The information on the website, could be expanded to cover more areas of interest to business owners and managers. Respondents noted that HSE documents can be difficult for business owners to understand, especially those who might not be well-versed in health and safety. There is therefore potential to create documents and resources that are more easily accessible. This includes practical tools and guidance aimed at smaller businesses.

There was a feeling amongst respondents that the HSE has provided access to high quality information in the past, such as advice booklets, but resources like these have reduced in recent years. Environmental health professionals told us of the importance of good accessible guidance in order to “connect, influence and validate the industry groups and [HSE’s] guidance could assist and improve safety and efficiency”.

8 CIEH local authority workforce survey results for England, CIEH, April 2021.
Future priorities and changes to the world of work

This section summarises some of the areas survey respondents suggested should form part of the HSE’s future strategy. Whilst there were many suggestions, we have identified the most-commonly mentioned themes below.

Public health and infectious diseases

Respondents called on the HSE to have more focus on health, wellbeing and public health issues, which are closely related to health and safety at work. Engagement with key stakeholders and agencies and working jointly towards a common goal or agenda is likely to bring benefits to population health and wellbeing. There were strong calls for health to be given a higher priority in the next HSE strategy.

“Greater emphasis on health of the workforce, [which is] inextricably linked with the wider Public Health agenda.”
Prior to COVID-19, HSE has been reluctant to get involved in outbreaks of infectious disease where a HSE-enforced workplace is the suspected source of the infection e.g. E.coli O157 and Cryptosporidium at animal premises, legionella outbreaks, and COVID-19 in the initial stages of the pandemic. I have worked for PHE and Public Health teams in LAs and trying to engage HSE before a confirmed result is known to be extremely difficult.

Working more closely with public health colleagues also has the advantage of prioritising the prevention of ill health in the workplace, which is something that the last HSE 10 year strategy identified as a key priority area. More progress should be made in this area by combining efforts with other bodies and regulators. There were also calls for further engagement with the new Office for Health Improvement and Disparities (OHID).

HSE need to recognise, accept and value the additional roles and expertise of LA partners in occupational health fields as well as the need to support evolution of HSW and its role in protecting wider public safety (eg customer safety (eg allergens, cosmetic treatments, legionella), employees in pandemic, outdoor events and festivals, wider determinants of Public Health as they relate to workplaces.

HSE’s response to COVID-19 and spot checks

HSE’s approach to infectious diseases in premises where they are the enforcing authority should be continued, including working with the business community to address infectious diseases as part of their risk assessments. This approach could also help to improve work practices in the long term, helping to keep the workforce healthy and plan for any future pandemics or large-scale incidents.

There were mixed views on spot checks across both the public and private sector. Some respondents were positive about spot checks and thought more businesses had been contacted than would have been possible for LAs to do without this support. Others questioned why the additional resources provided by government for this work had not been allocated to LAs. Some aspects of spot checks were highlighted as causing problems, such as a lack of proof of formal identification of those conducting the spot check, leading to business owners thinking the person calling was part of a scam. There was a reliance on businesses assessing their own arrangements for health and safety during phone calls, which did not always reflect the reality on the ground. It was also mentioned that the tick box approach was not always appropriate and use of private contractors caused inconsistency in checks.

As a private business we have been on receiving end of spot checks and have welcomed them.

Spot checks have been useful to ensure there is a baseline of duty holder knowledge but not a replacement for site visits.

The spot checks were helpful, although the telephone approach did not always identify the reality on the ground

The spot check approach works well but only in relation to a single issue and would not be an adequate substitute for a risk rated workplace inspection.

I would prefer to see LA resilience and capacity increase supported so that reliance on HSE spot checks is not required.

There was some support for spot checks to be expanded beyond COVID-19 and become a permanent feature in the future, subject to some improvements being
made and any future programme being designed in partnership with LAs as partners in planning and delivery. Respondents from both public and private sectors mentioned that spot checks should not be seen as a replacement for LA resourcing of health and safety related work.

Smaller businesses

When asked about where limited health and safety resources should be directed in the future, respondents made a strong call for more focus on smaller businesses, which are less likely to have access to good quality health and safety advice.

Whilst HSE has developed some resources aimed at smaller business owners, as part of its Health and Safety Made Simple campaign, these resources should be further developed. It was suggested that additional tools and guidance, such as LPG cylinder storage for smaller businesses, would be beneficial and promote better compliance. Wider promotion and dissemination of the tools would also be useful. Respondents also mentioned that more proactive inspections of these types of businesses are likely to help with improving safety and compliance.

“Need to focus on micro businesses as there are so many more of them.”

“Improvements in tools for small businesses to help them write safety policies and risk assessments. Easy to find examples of things like risk assessments so that small businesses don’t have to be experts at everything they do and can find good information quickly eg: how to store small quantities of LPG cylinders safely.”

Some respondents highlighted the need to focus on rogue operators and joint working with other services, agencies and regulators to ensure that businesses with criminal links are targeted.

“Small businesses appear to be more often linked with other criminality so there needs to be a H&S link into other intelligence networks involving Police, TS, FSA, Home Office etc.”

Changes to workplaces and work patterns

Work patterns, contracts, places of work and technology are all changing quickly and COVID-19 has accelerated this change. Many employers are implementing more permanent hybrid approaches to working. New, more efficient and automated systems are being introduced to improve productivity. The gig and self-employed sectors have also grown with the increase in home delivery services during the pandemic. Employees are increasingly not based at a single location and are not working set hours. All of these changes could impact the health of workers and should be included in the forward-looking HSE strategy. A key concern expressed in the survey was the impact of lone and remote working on workers’ mental health. There were also calls from respondents for a renewed focus on workplace health and long-term health conditions related to work.

“Stress and mental health are a serious concern, especially given the work from home and shifts in working landscape.”

“Focus on health impacts rather than just on accidents. Including asbestos, MSDs and other long term conditions.”

“Managing risk from new technology Including wider drone use, nanotechnology, greater automation and autonomous plant, coherent
positive safety culture across more dispersed workforce, ongoing financial pressures driving safety compromises at personal and corporate level.

“The move from traditional work activities and organisations towards flexibility and more organic organisations e.g. Home working, Hybrid working (between home, office, 3rd party office, or in transit)”

“RSI and Muscular skeletal disorders from home working without appropriate seating/desks/monitors etc.”

“New technologies, chemicals, materials and their impact on the environment and health throughout their life-time and beyond.”

There were also concerns expressed about the growth in the gig economy and self-employed workers. It was felt that these workers are not afforded sufficient protections under health and safety law. Workplace transport was specifically identified as an issue that came up in responses, especially in light of the increase in home deliveries and couriers working to meet ambitious targets.

“Management of Road Risk should be a H&S matter”

“Couriers, delivery drivers/bikers/cyclists – driven to cut corners by piece-work, task & finish, and speed targets – all of which negatively affect safety performance.”

“Impact of the Gig economy, zero-hour contracts and use of agency workers. These are potentially workers who will not challenge the conditions they are having to working in and are difficult to engage with.”
Next steps

CIEH is grateful to all who participated in this survey. It provides useful environmental health professional perspectives about health and safety priorities and the operation of the current health and safety regulatory system in Great Britain. Some clear findings have emerged from the survey which have been shared with the HSE.

CIEH will facilitate further engagement with members when the scope of the HSE strategy review becomes available and will use member feedback to inform its response to any future consultation.

Appendix – list of questions

Questions for respondents from all sectors

- What future challenges do you see for health, safety and wellbeing at work over the next 10 years?
- Is there anything you would like to see changed in HSE’s approach in the future?
- Do you have any views to share on the HSE’s spot checks programme? Have spot checks worked well and would you support this programme evolving into something permanent in the future across other areas of health and safety?
- Where should resources be prioritised to make the biggest impacts on health and safety regulation?
- Is there anything else you would like to share with us that we have not covered?

Additional questions for those in local authorities

- What currently works well in the co-regulatory relationship between HSE and LAs?
- What could be improved about the co-regulatory relationship between HSE and LAs?
- Are there any responsibilities or areas that are currently regulated by HSE, that should move to LAs?
- What could help with resources allocation for health and safety regulation at local authority level?
- Are there any activities that your team cannot currently take on, due to resource constraints? If so, what would be the benefit to workers and the public of improving resources in our team?