



# **BAOHSF (Bradford Area Occupational Health and Safety Forum)**

Statistical report on occupational health and safety in  
Bradford

02/03/2008

## **Population numbers**

485,000 Bradford Populations (Bradford, Projection Outputs 2005-2030 *School of Geography, Ethnic Projection Model, 2006*).

467,655 (supplied by Dominic Whowell, Jobcentre Plus, 2006)

Approx half a million (BAOHSF)

94,000 people are aged between 50-69 (Corinna Stowell, Third Age Network 2006)

## **Numbers in work/Worklessness**

287,600 Working Age Population (Annual Population Survey 2006)

269,826 Working age population (supplied by Dominic Whowell, Jobcentre Plus, 2006)

202,000 Total in employment -working age (Key Economic Statistics Updated 25/04/05 Bradford Council)

198,500 Employed (Annual Population Survey 2006)

28,480 Sick and disabled (supplied by Dominic Whowell, Jobcentre Plus, March, 2007)

6% of the total population sick and disabled (Lorraine Thacker, Employability/Mindful Employer 2006)

56,905 Benefit Claimants (supplied by Dominic Whowell, Jobcentre Plus, March, 2007)

89,100 workless (Annual Population Survey 2006)

48,000 (51%) of 50-69 year olds are in employment. (Corinna Stowell, Third Age Network 2006) -Yorkshire and Humber rate 71%.

10% of the working age population are sick or disabled (BAOHSF - 6% of 280,000 or approx 30,000)

## **Over 50s Employment**

An analysis of recipients of Job Seekers Allowance in Bradford District found that (Older Peoples Partnership interim report from Employment, Economy and Learning group April 2007):

- As of December 2006, 9830 people were claiming Job Seekers Allowance 1445 were over 50 (14.7%)

Despite some targeted effort, initial un-audited figures suggest that while 27% of the workless population is over 50:

- Of 145 users of Remploy in Bradford none were over 50
- Of 492 'beneficiaries engaged' on Fair Cities only 9 (2%) were over 50

Of 57 'beneficiaries' on the Fair Cities JAWS programme obtaining jobs only one was over 50 (1.75%)

### **Mental Health Problems/Stress and work**

A high number of the Sick or Disabled have declared a problem around their mental health

78% of those with depression/anxiety want to work (Lorraine Thacker, Employability/Mindful Employer 2006)

86% with phobias/stress disorders want to work (Lorraine Thacker, Employability/Mindful Employer 2006)

24% of with long term mental health are in employment (Lorraine Thacker, Employability/Mindful Employer 2006)

40%+ employers will not employ someone who has experienced mental ill health (Lorraine Thacker, Employability/Mindful Employer 2006).

Badly managed workplace stress costs Britain billions, Mind revealed in a report in May 2005. Stress costs 10% of the UK's Gross National Product – yet fewer than 10% of companies have official policy to tackle it.

### **Work related ill health**

5.2% of people ever employed suffer from an illness which they believe was caused or made worse by their current or past work in the Yorkshire and Humber region – these are the most local HSE statistics we can get (Yorkshire and the Humber government office region summary of statistics of occupational ill health, safety and enforcement 2005/2006).

75% (approx ) of cases of people suffering ill health, which they think is work related, are musculoskeletal disorders or stress, depression or anxiety. The rest are made up from other illnesses including: skin disease, respiratory disease, infection and audiological problems. (Self reported ill health SWI Labour Force Survey 2005/06 – a national survey of over 50 000 households each quarter.)

As with the self-reported cases, mental ill health and musculoskeletal disorders were the most common types of illness (THOR – The Health and Occupational Reporting network 2005/06). There is a distinct lack of local information on occupational ill health. BAOHSF has, after some effort, found some more local statistics but they are not very robust but the reporting systems used could potentially be built upon. The information comes from chest physicians, dermatologists, rheumatologists, psychiatrists, occupational physicians, consultants in communicable disease control, audiological physicians and by general practitioners from Bradford who have reported to THOR (The Health and Occupational Reporting network). On examination of the data, however, not one General Practitioner has participated in the reporting system in the past ten years! The data shows 16 cases of work related musculoskeletal disorders and 159 cases of work related mental ill health over the past ten years.!

## **Injuries at work**

1114 over three day injuries in 2005/06, 238 fatal and major injuries and 687 total injuries. (HSE 2005/06).

3 Agriculture, 7 Extraction and Utility supply, 311 Manufacturing, 77 Construction, 1018 Services (HSE 2004/05)

7079 total injuries for West Yorkshire 2004/2005 (HSE)

## **Work-related Cancer**

The HSE estimates that there are 6,000 occupational cancer death each year, but recent analyses suggest the real number is at least 12,000 (Hazards 2007, Report *Burying the Evidence*). We have no way of monitoring the number of these in Bradford at the moment.

Causes of work-related cancer: Workplace exposure to chemical, physical and biological agents. Metals, arsenic, chromium and nickel – bladder, lung and skin cancer. Chlorination by-products. Natural substances, asbestos and silica. Petrochemicals and combustion products (including motor vehicle exhaust fumes) – bladder, lung and skin cancer. Pesticides – brain cancer, leukaemia and lymphoma. Reactive chemicals eg Vinyl Chloride – liver cancer. Metalworking fluids and mineral oils – bladder, larynx, nasal, rectum, skin and stomach cancers. Ionising radiation – just about every kind of cancer imaginable. Solvents. Benzene – leukaemia. Tetrachloroethylene – bladder cancer. Trichloroethylene – Hodgkin’s disease, leukaemia, kidney and liver cancer.

## **Workers’ Health Advice Team (2006-07)**

The top 10 enquiries ... (1 being highest and 10 lowest)

- 1.** Work related stress
- 2.** Counseling
- 3.** Asbestos
- 4.** Hazards & Health and Safety law
- 5.** Employment & T/U rights
- 6.** RSI
- 7.** Training
- 8.** Benefits
- 9.** Compensation
- 10.** Smoking & Display Screen Equipment

**Information provided by Jim Fairbrass from the HSE (July07)**

	Bradford	Y&H	Great Britain
Total resident population (2005)	485 000	5 063 900	58 485 000
Working age population (2005)	295 500 (60.9%)	(61.7%)	(62.1%)
People in employment (Oct 05 to Sep 06) <i>(as percentage of working age population)</i>	205 700 (68.7%)	(73.4%)	(74.1%)
<i>Of which: Managerial / professional</i>	38.4%	37.5%	42.2%
<i>Admin / skilled trades</i>	22.9%	23.3%	23.2%
<i>Personal / customer service</i>	15.7%	16.1%	15.6%
<b>Operatives / elementary</b>	22.8%	22.8%	18.8%
Employee jobs (2005)	195 700		
<i>Of which: Manufacturing</i>	16.2%	13.8%	11.1%
<b>Construction</b>	3.4%	5.1%	4.6%
<i>Services</i>	79.6%	79.9%	82.9%
Number of premises (2006)	12 730	155 525	
<i>Of which: &lt;10 employees</i>	80.1%	79.8%	81.9%
<i>10-49 employees</i>	15.6%	16.1%	14.4%
<i>50-249 employees</i>	3.7%	3.6%	3.2%
<i>250+ employees</i>	0.6%	0.6%	0.5%

## Gap in the provision of Occupational Health Services

There is a gap in the provision of occupational health services in Bradford, (this is also a national problem). Bradford Area Occupational Health and Safety Forum undertook some research in 2005 around the provision of Occupational Health services provided by General Practitioners *Survey of Bradford GPs on work related ill health – July 2005*. This research backed up the knowledge that more occupational health services need to be provided in Bradford. The survey did show that 67% of GPs in Bradford believe they can identify workplace ill health from symptoms; 80% of GPs found that the most useful method for them to deal with Occupational Health was by having Occupational Health specialists that they could pass referrals to.

At the time when the findings of the GP research were presented to the Directors of Public Health in Bradford it was felt that Occupational Health was not a priority, despite the recent publication of the Choosing Health white paper which covered work and health. The Forum took the findings to Eleanor Green at the Bradford District Health Development Partnership and she steered the Forum towards the Local Area Agreements.

82% of the businesses in the Bradford area employ 1-10 workers. 14% employ 11- 49 workers. 4% employ 50-199 workers and **less than 1% employ over 200 workers**. (Bradford Council Key Economic Statistics).

Bradford Area Occupational Health and Safety Forum surveyed the larger businesses who have 200+workers in, 2004 this stood at 55. It found that even out of these massive companies that make only 1% of the employers in Bradford 44% of these companies had no occupational health provision for employees. The survey did indicate however, that 80% of large Companies in the Bradford Area have experienced improvements in productivity due to reviewing their attitude to Occupational Health and Safety i.e. implementation of new schemes and approaches to work practice.

HSE commissioned research showed 15% of all British firms provided basic occupational health support and only 3% provided comprehensive support (see HWWB strategy).

As part of the Forum's research the annual cost of occupational ill health in Bradford was estimated as being between £32 million - £40.5 million, this included direct wage costs, indirect costs to employers and other measurable costs, including incapacity benefit and health service costs. This was based on research undertaken by the University of York for Leeds Occupational Health and Safety Partnership.

Costs of Occupational Ill health in Bradford - taken from BAOHSF report (August 2004)

Direct Wage costs

Cost of injuries to workers in Bradford estimated at 2 million

Cost of sickness to workers in Bradford estimated at 11 million

Indirect Cost to employers

Including reduced productivity, insurance and legal costs, etc. (Usually equal to the direct wage costs, if not more.  
Estimated at 13million

Other measurable costs

Including incapacity benefit, impact of occupational ill-health on GPs and estimated cost of hospital admissions.  
Estimated at 6 million.

Total Estimated cost = £32million per year

Based on figures from the HSE and the Labour Force Survey.

If the figures from the Labour force survey were used alone this figure would rise to £40.5 million per year.

## Bradford West Yorkshire

This profile provides a snap shot of the local authority in terms of its health & safety statistics and the local economy. Figures on ill health and days lost are illustrative and should be considered "ball park" figures. See also 'LA profile user guide'.

### Self-reported work-related ill health

Musculoskeletal disorders, stress and respiratory conditions make up over 80% of prevalence cases nationally.

	Bradford (estimated no.)	Yorkshire & the Humber (per cent)	Great Britain (per cent)
Prevalence – limited to people who worked in the last 12 months	8 500	4.22	3.93
Incidence (new cases in last 12 months)	3 800	1.88	1.64

Source: LFS 'illustrative estimates' (see over page).

### Work-related working days lost

	Bradford (estimated no.) *	Yorkshire & the Humber (per worker) 2005/06	Great Britain (per worker) 2005/06
Due to work-related ill health	215 000	1.23	1.05
Due to work-related injury	60 000	0.34	0.26

Source: LFS 'illustrative estimates' (see over page).

\* Estimated from FOD Regional 3 year average rate 2003/04 to 2005/06

### Reported workplace injuries

2006/07 provisional (excluding railways)	Bradford (number)	Bradford (rate)*	Yorkshire & the Humber (rate)*	Great Britain (rate)*
Fatal & Major injuries to employees	262	133.8	132.8	107.0
Over-three-day injuries to employees	1 081	552.1	503.5	422.6
Total injuries to employees	1 343	685.9	636.3	529.5

Source: RIDDOR, FOD & LA

\*rate per 100 000 employees

### Estimated Costs

The estimated economic cost of health and safety incidents (accidents and ill health) in Bradford is £103 million.

### Background information

	Bradford	Yorkshire & the Humber	Great Britain
Total resident population (2006)	493 100	5 142 400	58 845 700
Working age population (2006)	303 100 61.5%	- 62.2%	- 62.2%
People in employment (Jan 06 – Dec 06) <i>(as percentage of working age population)</i>	208 100 69.2%	- 73.7%	- 74.3%
<i>Of which: Managerial / professional</i>	37.5%	37.4%	42.3%
<i>Admin / skilled trades</i>	22.9%	23.3%	23.0%
<i>Personal / customer service</i>	17.0%	16.6%	15.7%
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<i>50-249 employees</i>	3.7%	3.6%	3.2%
<i>250+ employees</i>	0.6%	0.6%	0.5%

Sources: APS, ABI, IDBR (see below).

### Local Authority Inspection visits 2005/06

	Bradford	Yorkshire & the Humber (responding LAs only)	Great Britain
Number of LA controlled premises	9 317	87 805	1 126 000
Number of visits	1 608	11 934	222 000
Visits per 1000 premises	173	136	197

Source: LAE1 returns

\* Figures not available

#### Data sources

**RIDDOR:** The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995, under which workplace injuries are reported by employers and others.

**Labour Force Survey (LFS):** A national survey of over 50 000 households each quarter, giving estimates of self-reported work-related ill health and injuries.

**Illustrative estimates:** Derived simply by multiplying total employment in the Local Authority by the relevant regional illness/days lost rates, and then scaling so that the total of all LAs equals the published regional total. For prevalence and incidence, 2005/06 rates have been used. For days lost, an average rate from 2003/04 to 2005/06 has been used.

**Estimated costs:** The estimated cost shown is the full societal cost (human and economic cost) and is based on Department for Transport methodology. The costs have been estimated using national average figures for different accident severities and cases of work-related ill health.

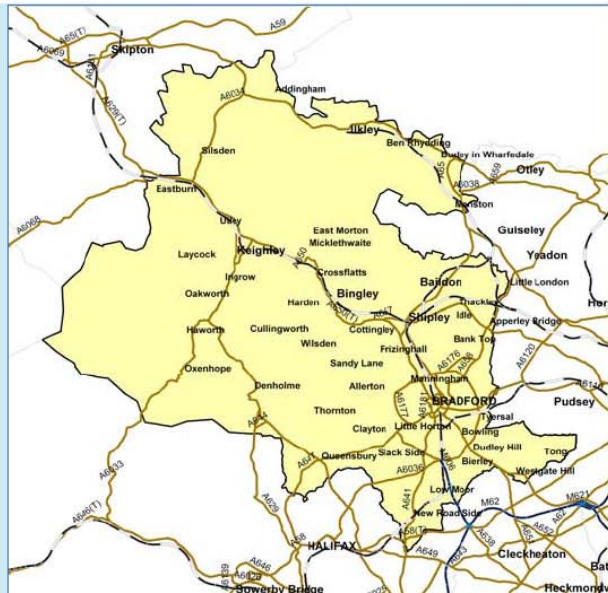
# Bradford Health Profile 2007



This profile gives a snapshot of health in your area. With other local information, this Health Profile has been designed to support action by local government and primary care trusts to tackle health inequalities and improve people's health.

Health Profiles are funded by the Department of Health and produced annually by the Association of Public Health Observatories.

To view Health Profiles for other local authorities and to find out how they were produced, visit [www.communityhealthprofiles.info](http://www.communityhealthprofiles.info)



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## Bradford at a glance

◀ This is a Spearhead area

- Bradford has a higher than average proportion of residents dependent on benefits, but the level of statutorily homeless households is lower than the England average.
- Residents of Bradford are less likely than average to be healthy eaters, but their smoking and drinking habits are estimated to be similar to average.
- The proportion exercising five times a week is similar to average, but is the highest of any Metropolitan Authority.
- The city has above-average mortality rates from smoking, cancer, and heart disease and stroke among under-75s, although in the latter case the gap has narrowed over recent years.
- Improvement in female life expectancy has been rather slow, and life expectancy for both sexes is one-and-a-half years below the England average.
- There is a gap of eight years in male life expectancy between the most and least income-deprived fifth of areas.
- An above-average proportion of residents are registered as having diabetes.
- An Infant Mortality Commission was set up to address the higher than average rate of death under one year of age, and local agencies are working towards implementing its recommendations.
- The Council-led "b active" campaign encourages physical activity among otherwise sedentary residents across all age groups and cultures, using targeted interventions to increase attendances at swimming pools and sports centres.
- Work is being funded on a number of key priority areas including obesity, physical activity, sexual health and alcohol prevention. Further initiatives include the development of a district-wide "obesity champion" post.

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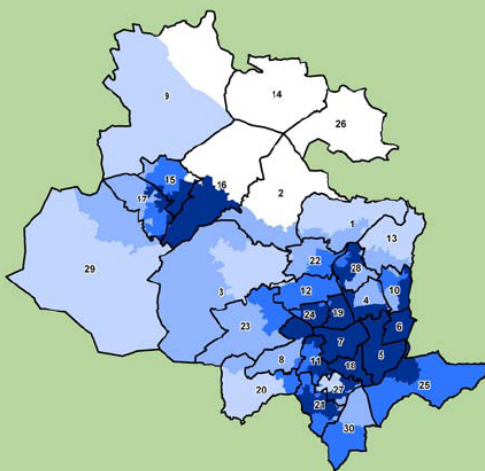


## Income inequalities: a national perspective

This map shows variation in the percentage of people on low income, between small areas in this local authority *in relation to the whole of England* (2003).

### National income groups

- 1 Least income-deprived fifth of areas in England
- 2
- 3
- 4
- 5 Most income-deprived fifth of areas in England

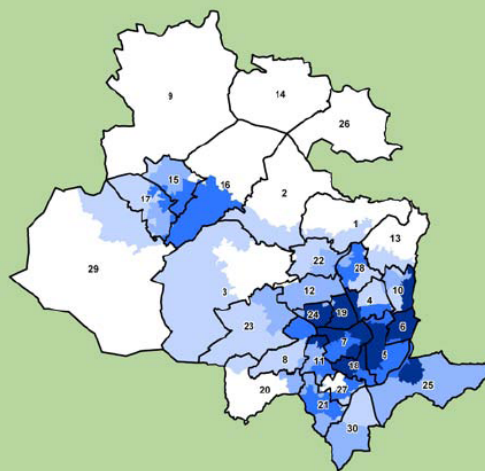


## Income inequalities: a local perspective

This map shows variation in the percentage of people on low income, between small areas *within this local authority* (2003).

### Local income groups

- 1 Least income-deprived fifth of areas in this local authority
- 2
- 3
- 4
- 5 Most income-deprived fifth of areas in this local authority



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## Ward legend

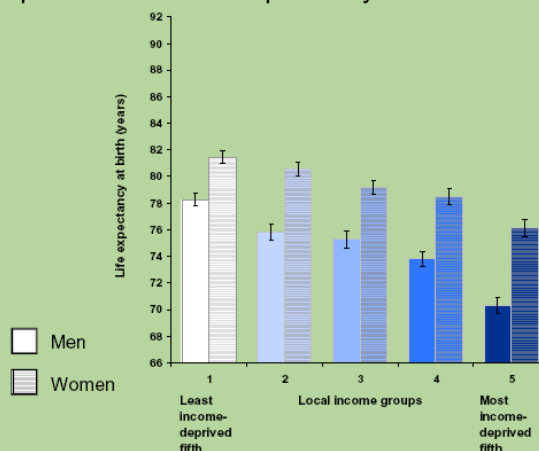
- |                                 |                 |
|---------------------------------|-----------------|
| 1 Baildon                       | 29 Worth Valley |
| 2 Bingley                       | 30 Wyke         |
| 3 Bingley Rural                 |                 |
| 4 Bolton and Undercliffe        |                 |
| 5 Bowling and Barkerend         |                 |
| 6 Bradford Moor                 |                 |
| 7 City                          |                 |
| 8 Clayton and Fairweather Green |                 |
| 9 Craven                        |                 |
| 10 Eccleshill                   |                 |
| 11 Great Horton                 |                 |
| 12 Heaton                       |                 |
| 13 Idle and Thackley            |                 |
| 14 Ilkley                       |                 |
| 15 Keighley Central             |                 |
| 16 Keighley East                |                 |
| 17 Keighley West                |                 |
| 18 Little Horton                |                 |
| 19 Manningham                   |                 |
| 20 Queensbury                   |                 |
| 21 Royds                        |                 |
| 22 Shipley                      |                 |
| 23 Thornton and Allerton        |                 |
| 24 Toller                       |                 |
| 25 Tong                         |                 |
| 26 Wharfedale                   |                 |
| 27 Wibsey                       |                 |
| 28 Windhill and Wrose           |                 |

Ward boundaries 2005 superimposed upon MSAO (Middle Super Output Area) boundaries. Numbers correspond to ward legend. Ward boundaries may have changed.



## Health inequalities: a local perspective

This chart shows inequalities in life expectancy (2001-05) at birth for men and women for the five local income groups presented in the map directly above.



95% confidence interval. These indicate the level of uncertainty about each value on the graph. Longer/wider intervals mean more uncertainty. When two intervals do not overlap it is reasonably certain that the two groups are truly different.



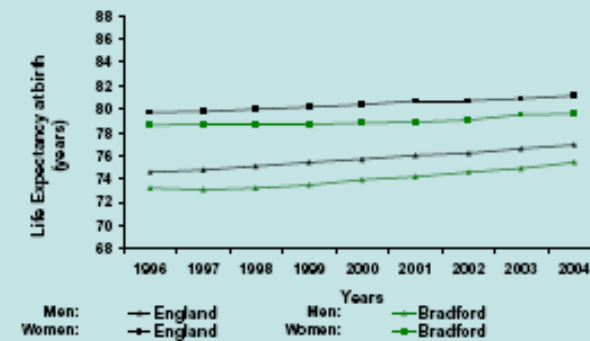
## Health inequalities: changes over time

Trend 1 compares the trend in life expectancy at birth for men and women in this local authority with that for England.

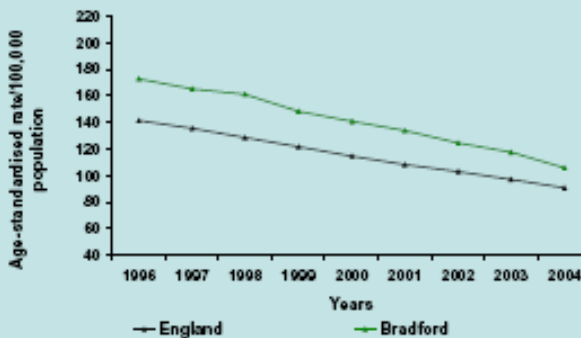
Trend 2 compares the trend in early death rates (all persons under 75 years) from heart disease and stroke in this local authority with that for England.

Trend 3 compares the trend in early death rates (all persons under 75 years) from cancer in this local authority with that for England.

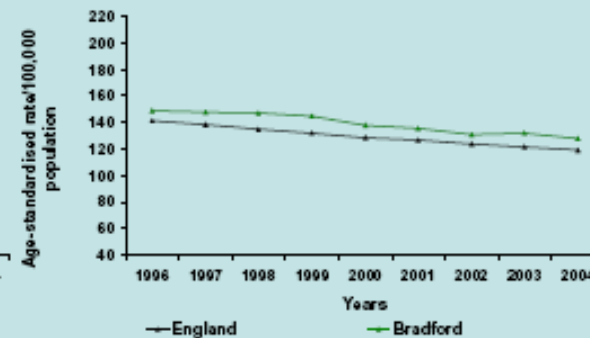
Trend 1:  
Life expectancy at birth



Trend 2:  
Early death rates from heart disease and stroke



Trend 3:  
Early death rates from cancer



## Health inequalities: ethnicity

This chart compares the percentage of the population of each ethnic group in the local authority who are in routine and manual occupations. People in these occupations have poorer health than those in professional

occupations, and are more likely to be smokers. The infant death rate is higher than average among babies born into this group. There are national targets to address these health inequalities.

Percentage and number of people aged 16-74 in routine and manual occupations

Ethnic Group	Percentage	Number
White British	32	80460
White Irish	28	779
White Other	22	1068
Mixed	25	1022
Indian	28	2678
Pakistani	25	10201
Bangladeshi	25	731
Asian Other	22	464
Black Caribbean	35	851
Black African	18	123
Black Other	35	74
Chinese	15	108
Other	18	133

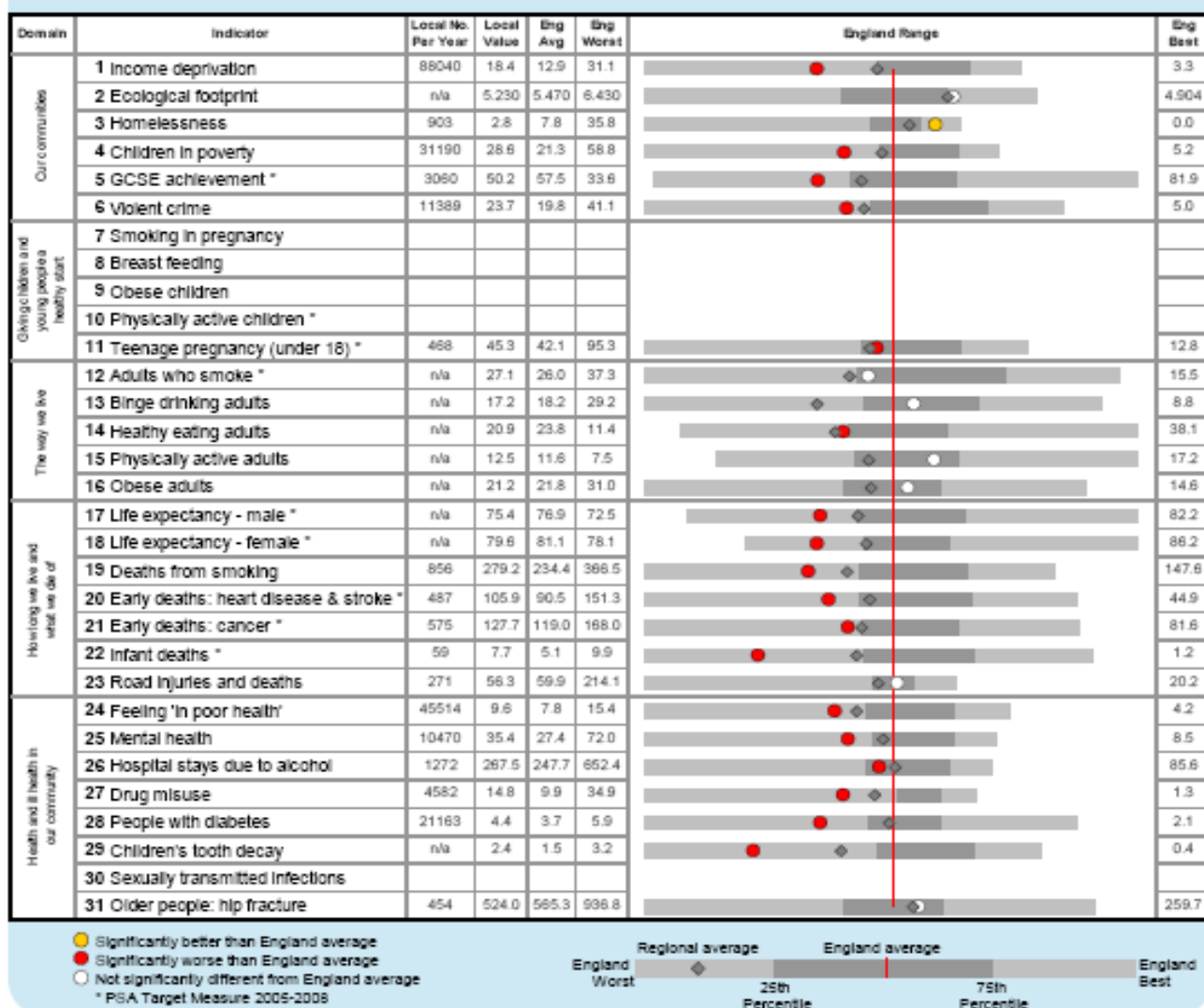
Note: This chart is based on the 2001 Census. Where the total population in an ethnic group in the local authority is less than 30, no data have been presented and the number column shows n/a. Where the number is less than 5, no percentage is shown.

Confidence intervals are shown for local data.

□ England - average  
■ Bradford

## Health summary for Bradford

The chart below shows a number of indicators of people's health in this local authority. It shows the local value for each indicator compared to the England worst, England best, England average and Regional average. The circle indicating the local value is shown as amber if it is significantly better or red if it is significantly worse than the England average. An amber circle may still indicate an important public health burden. A white circle is not significantly different from the England average. For technical information about each indicator, see [www.communityhealthprofiles.info](http://www.communityhealthprofiles.info)



**Note** (numbers in bold refer to the above indicators)

1 % of residents dependent on means-tested benefits. 2003. 2 Land (hectares per capita) required to support an average resident's lifestyle; no significance calculated. 2001. 3 % of households on local authority housing register who are statutorily homeless. 2004/05. 4 % in low-income households. 2001. 5 % achieving 5 A\*-C. 2005/06. 6 Crude rate/1,000 pop 2005/06. 7 8 9 10 30 No comparable local data currently available. 11 Crude rate/1,000 female pop. aged 15-17. 2002-04. 12 13 14 16 %. Modelled estimates from the Health Survey for England. 12 13 16 2000-02. 14 2001-02. 15 %. 2005/06. 17 18 Years. 2003-05. 19 Directly age standardised rate/100,000 pop. aged 35 or over. 2003-05. 20 21 Directly age standardised rate/100,000 pop. under 75. 2003-05. 22 Crude rate/1,000 live births. 2003-05. 23 Crude rate/100,000 pop. 2003-05. 24 Directly age standardised %. 2001. 25 Crude rate claimants of benefits/allowances for mental or behavioural disorders/1,000 working age pop. 2005. 26 Directly age sex standardised rate/100,000 pop. 2005/06. 27 Crude rate/1,000 pop. aged 15-64; no significance calculated for lower tier authorities. 2004/05. 28 %. 2005/06. 29 Average no. of decayed, missing and filled teeth in children aged 5; data incomplete or missing for some areas. 2005/06. 31 Directly age standardised rate/100,000 pop. aged 65 and over. 2005/06.

For more information from your regional PHO, visit [www.apho.org.uk](http://www.apho.org.uk)

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