1. Introduction

1.1 Working towards healthier and more productive working lives must be a key ambition for everyone in the rail sector. For an industry employing around 150,000 people, and faced with growing demand and a need for increased efficiencies, the business case for continuously improving worker health and wellbeing in an ageing workforce is clear. There is good evidence that excellent management of worker health brings increased productivity and employee engagement, as well as consistent legal compliance. This report provides insight into where progress has been made and what remains to be done, to inform on-going delivery of our 2014-19 Health Programme 'Making it Happen'¹. It also assesses the impact of ORR's first health programme in driving the industry's progress towards excellence in managing health.

Purpose

- 1.2 This report provides an updated assessment on the management of work-related ill health in the rail industry by 2014, at the end of ORR's first four year health programme². It provides an update to our initial 2011 baseline report³ by discussing the scale and costs of work-related ill health, and the maturity of the industry in managing occupational health by 2014. It covers the period 1 April 2010 to 31 March 2014 and aims to identify the areas where good progress has been made by the industry, but also to shine a spotlight on those areas where more needs to be done under our 2014-19 health programme to deliver both the health and the economic benefits that arise from excellent health management.
- 1.3 This report also seeks to assess the impact of ORR's first health programme by reviewing trends in the health indicator measures reported in our 2011 baseline report, using the results of a repeat of our baseline survey of industry in 2014, together with ORR data.

Scope

1.4 This report is relevant to all parts of the rail industry, including rail operators, infrastructure managers, and contractors, whether on the mainline, metros, or heritage. It is aimed at industry leaders, those directly responsible for managing worker health, occupational health specialists, and should also be of interest to employees' representatives and wider industry groups. The main focus of ORR's health programmes is seeing the industry achieve excellence in the management of health through consistent legal compliance, and so this report primarily looks at the management of work-related (or occupational) ill health. This describes those

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¹ ORR's 2014-19 health programme: http://orr.gov.uk/ data/assets/pdf file/0007/12031/occup-health-prog-2014-19 pdf

² ORR's 2010-14 health programme: http://orr.gov.uk/ data/assets/pdf file/0013/3550/occup-health-prog-2010-14.pdf

³ ORR's 2011 baseline report: http://orr.gov.uk/__data/assets/pdf_file/0009/5796/work_related_ill_health_overview_2010.pdf

- conditions that are caused or made worse by work, for example the adverse effects of exposure to dust, asbestos, noise, vibration, musculoskeletal risk or work-related stress. There is, however, inevitably some overlap with wider aspects of worker health such as fitness to work and general wellbeing and lifestyle management.
- 1.5 This updated position paper has been informed by intelligence gathered from a wide range of sources, including published and internal reports, previously unpublished data, as well as information from ORR's strategic and inspection work with the rail industry. To inform this review we commissioned independent research to capture the rail industry's view on the impact of our 2010-14 health programme. We also commissioned a separate internal report to review sample data on management referrals from a leading occupational health service provider.