

# Health and Safety Bulletin

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- Aging workforce – the effect on health and safety

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## Aging workforce – the effect on health and safety

Research issued by Aviva in 2013 based on a survey of 1000 UK employers and 1000 employees, revealed that nearly a third (29 per cent) of employers are witnessing a rise in the average age of their workforce, while 37 per cent expect to see it get older in the future. This change is partly a result of the requirements of the Equality Act (2010), which enshrines the right not to be disadvantaged or treated badly at work because of age, but also due to increased longevity and financial pressures (such as the state pension age being increased to 68 by 2046).

Employers will be expected to plan for this change, updating their risk assessments to take into account the characteristics and potential vulnerabilities of their workforce. So how can they manage this change effectively?

### *The effects of aging*

For an employer to manage the effects of this change in demographics, they need to understand the risk factors.

Research has shown that common physical changes include

- reduction in muscle strength (as assessed by handgrip strength) – this starts to decrease from the age of 30
- aerobic capability declining from the age of 30
- reduced ability to balance – tests have shown that older people have increased sway (but this varies depending on occupation)
- decreased spine flexibility

Psychologically, older people have been shown to have a slower reactions time – this is thought either be related to a slowing of the central processing system or to increased caution and a desire to be accurate

In terms of health, the over 50s are likely to have an increased Body Mass Index (BMI), body weight and a lower stature. Additionally they may have specific health problems that could exacerbate the consequences of accidents – for example, workers with osteoporosis (a disease which causes the bones to become less dense) are more likely to suffer fractures in a fall, and those with cardiovascular problems are likely to have reduced tolerance to heat

Some senses are also affected by age. Near vision becomes more difficult as the lens becomes less elastic, and the sharpness of vision may decrease if the retina degenerates.

However, to complicate matters most of the research also shows that you cannot stereotype how age will affect individuals and that the variation in physical fitness and health of older people is often greater than that of the younger generations!

*Are older people more prone to injury?*

The most recent accident rates available from the HSE related to age are for the 2010/2011 period.

Age range	Incidence rate		
	Fatalities	Major injuries	Lost time accidents
16-19	0.6	63.9	193.2
35-44	0.4	78.3	325.4
55-59	0.6	118.0	342.4
60-64	1.0	133.6	361
64+	1.0	79.1	132.9

These statistics indicate that those aged 60-64 have the highest incidence rate for all types of RIDDOR reportable accidents, but those aged over 64 have a lower incidence rate for both major and lost time accidents than most age groups.

There is evidence that older people also require greater recovery time following an accident or illness, although when they do return to work there is no age-related limitation to the type of work they do.

*Conclusion*

There are already more workers aged over 50 than there are under 25 in the UK, so it likely that all employers are eventually going to need to either recruit or retain an older workforce.

By assessing the risk factors associated with aging, employers can identify equipment, training strategies and environmental condition changes that will minimise the risk of injury. For example, the additional provision of mechanical aids to help with manual handling activities or improved lighting to overcome any visual impairments.



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