

Health and Safety

Bulletin Ladders

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Falls from height accounted for 28% of the work-related fatalities that were reported under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR) between April 2012 and March 2017 – this equates to approximately 41 deaths per year. The HSE has also published data indicating that 34% of these fatalities involve the use of ladders.

Driven by these statistics, the HSE have provided detailed guidance on when and how ladders should be used as temporary access equipment. It is clear from HSE's publications that they regard ladders as the last choice of access equipment (after fixed or tower scaffolds, mobile elevated work platforms (MEWPs) and forklift truck cages). The HSE are clear that they have not banned ladders (although some employers have chosen to do this on their sites).

When should a ladder be used as access equipment?

The basic guidance is that ladders are suitable for low risk short duration activities. The risk assessment should take place first.

“Short duration” is defined as less than 30 minutes.

What other risk reduction measures are required for ladder use?

Once a ladder or stepladder has been chosen as the access equipment, it is important that the risks associated with their use are minimised.

- **Choose the right quality ladder in good condition** - currently there are two standards for ladders that should be used at work – class 1 Industrial and EN131. However the new standard BS EN 131 is currently being implemented. Ladders to the existing standards can be used until they need to be replaced, but once the new standard is fully implemented, all new ladders should be BS EN 131 Professional. Due to the way ladders are stored, moved around and used, they also need to undergo formal and pre-use inspections
- **Set the ladder or stepladder up safely** – the environment in which the ladder is used (e.g. slopes, loose material) and how it is set up (e.g. step ladder facing the working area with locking devices fully engaged) can increase the risk significantly
- **Competence of the user** – the requirement for pre-user checks and the worker's understanding of how ladders and stepladders can be used safely indicates that a certain amount of training is required. However, this does not mean everyone who uses a stepladder has to be sent away on a training course – an on-site briefing focusing on the types of activities they are likely to get involved with is normally more effective
- **Maintain three points of contact** – this can reduce the risks associated with ladder use. Preferably the three points should involve the hands and the feet, but leaning into the ladder and maintaining contact using your trunk also counts

Conclusion

The seriousness of the type of injuries associated with the use of ladders and stepladders justifies the risk reduction controls that need to be implemented. Unfortunately because anyone can buy a ladder or stepladder from their DIY store, they believe they instinctively know how to use it – the statistics indicate this is not true!

Recently issued/revised health and safety information:

- Updated 1st aid poster
<https://books.hse.gov.uk/bookstore.asp?Action=Book&ProductId=9780717666706>
- Electricity shock 1st aid poster
<https://books.hse.gov.uk/bookstore.asp?Action=Book&ProductId=9780717664337>
- Farmwise Your essential guide to health and safety in agriculture
<http://www.hse.gov.uk/pubns/priced/hsg270.pdf>
- Controlling airborne contaminants at work - A guide to local exhaust ventilation (LEV)
<http://www.hse.gov.uk/pubns/priced/hsg258.pdf>
- Code of Practice for: The Safe Installation of Precast Concrete Flooring and Associated Components
<http://precastfloors.info/publications/publicationscop.html>

Medication increasing the risk of accidents?

IOSH has recently issued some research (The Role of Health Problems and Drug Treatments in Accidental Injury at Work <https://www.iosh.co.uk/Books-and-resources/The-role-of-health-problems-and-drug-treatments-in-accidental-injury-at-work.aspx>) that indicates the increasing average age of the working population is potentially leading to another risk management challenge for employers – the increasing number of workers dependent

on medication and the increased accident risk associated with the use of this medication.

The study found that people on prescribed medication were at higher risk of workplace injury – for example, workers on anti-depressants had a 39% higher risk of an accident than those on no medication; for people taking anxiolytic drugs to treat anxiety the risk was 76% higher than the control group. However, there was no evidence that workers

with diabetes or epilepsy had a statistically significant increase in the risk of occupational injury.

The research team concluded that employers should be carrying out risk assessments on an individual basis, where appropriate to ensure the risk was minimized through job placement and suitable risk controls.

Case Law update

This issue focuses on cases associated with the use of ladders and stepladders

An agency worker was injured when he fell approximately two metres from a ladder. He sustained two fractures to his right foot and bruising to his chest and head injuries. He was in the process of checking the fill level of the malt in a container – this involved propping a long ladder against the rear of the container, the ladder was propped at too shallow an angle and it slipped outwards at the foot causing the agency worker to fall with the ladder. The HSE investigation found that the company had not carried out a suitable and sufficient risk assessment of the work at height and they were fined **£100,000** and ordered to pay costs of **£2,257**

Greencore were fined **£1million** plus **£30,000** costs after a self-employed electrician died after falling 3m. Greencore had provided the contractor with a 1.7m ladder and issued him with a work at height permit for the job (stating the ladder was suitable), but the stepladder was too short and the contractor tried to complete the work with one foot on the stepladder and one on the top of a processing machine. The permit had been issued by a team leader who had not had any training in work at height. After the fatal accident, Greencore fitted a permanent access metal platform to the rear of the mixing machines, with ladders, gated access and guardrails. It also improved training for its employees responsible for permits

to work

A teacher, carrying out rigging and adjustments to spotlights and cabling in the school drama studio, fell from a stepladder and suffered multiple fractures to the skull, wrist and elbow as a result of the impact. The court found the school had inadequately risk assessed work at height in the studio and had failed to provide the teachers conducting the work with sufficient training for work at height, despite the requirements of their own health and safety policy. The school pleaded guilty to a breach of Regulation 6(3) of The Work at Height Regulations 2005, was fined **£2,000**

About Clwyd Associates...

We are a management consultancy, focusing on health and safety and SAP based in the Midlands.

We employ consultants with at least 15 years practical experience backed up by recognised professional and academic qualifications - ensuring our clients receive first class service.

Permit Training

Clwyd Associates carry out a variety of specialist permit training for both permit issuers and acceptors. This includes hot work, work at height and confined space.

The training covers

- Common hazards and risk reduction methods
- Mitigation controls and procedures

linked not only to legislation but also recent case law

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