



Summary of Workplace Injury,
Illness and Fatality Statistics

2016-2017

2016-2017

Our Vision:

healthy, safe and productive lives

Acknowledgements

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Abbreviations

CSO	Central Statistics Office
ESAW	European Statistics on Accidents at Work
ESRI	Economic and Social Research Institute
HSA	Health and Safety Authority
ILO	International Labour Organization
ISCO	International Standard Classification of Occupations
NACE	<i>Nomenclature statistique des activités économiques dans la Communauté Européenne</i> (Statistical Classification of Economic Activities in the European Community)
NALA	National Adult Literacy Agency
OIB	Occupational Injury Benefits
QNHS	Quarterly National Household Survey
LFS	Labour Force Survey

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1

Introduction, overview and methodology

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1.1 Introduction

The Health and Safety Authority's annual Summary of Workplace Injury, Illness and Fatality Statistics presents the most recently available statistics on occupational injury, illness and workplace fatalities in Ireland. Key data from several relevant sources identify the most important trends in workplace safety, such as overall incidence of fatal and non-fatal injuries and reported illnesses, as well as the most common characteristics of accidents and illnesses. These include the age groups, gender, nationality and employment status of victims. They also feature information on the kinds of work-related injury or illness experienced, such as the body part injured or the working environment where the accident took place. Employment data from the Central Statistics Office facilitates the generation of accident and illness rates in each of the economic sectors, allowing the tracking of rates in economic sectors over time, and the identification of economic activities that pose challenges to worker health and safety.

Note that the characteristics of work-related injuries and accidents may be interrelated. For example, certain economic sectors like Construction have both a high proportion of male workers and generally higher risks of injury. To separate these influences on risk, statistical analyses have been undertaken by the Economic and Social Research Institute (ESRI) in a number of studies. The most recent of these explored the risks in the five major economic sectors Agriculture, Forestry and Fishing; Construction; Health and Social Work; Transport and Storage; and Industry from 2001 to 2014 (Kenny et al., 2018). This report is available, along with other ESRI studies, from the HSA website. The main findings of the statistics report are described in Section 1.2.

Sources of data and methodologies are outlined in Section 1.3, while Section 1.4 explains how rates of fatal injuries, non-fatal injuries and illnesses are calculated. Links to further information on technical issues are included in Section 1.5.

1.2 Overview for 2016–2017

Non-fatal injury

Statistics on work-related injury in this report derive from two main sources of information: firstly, the record of incidents reported to the HSA, and secondly, the data provided by the annual module on work-related injury and illness in the Quarterly National Household Survey (QNHS), collected by the CSO (see Section 1.3 for details).

HSA figures

Of the 9,143 non-fatal injuries reported to the HSA in 2017, 8,709 (95%) involved workers, while the remaining 434 involved members of the public, including workers' family members. The number of injuries causing four or more days' absence from work reported to the HSA in 2017 increased by 9% compared to 2016 (Figure 2.1). Taking into account the increased number of people in employment in 2017, the rate of reported injuries as a proportion of those in employment increased slightly, from 3.9 per 1,000 in 2016 to 4.0 per 1,000 in 2017.¹

The Health and Social Work sector accounted for 20% of the non-fatal injury reports to the HSA, followed by the Manufacturing sector, with 18% of reports (Figure 2.2). The Health sector is over-represented in the HSA statistics compared to its size in the labour market, where it accounts for 13% of all employment (Figure 2.3); however, this may be due to better employer reporting systems rather than a higher underlying injury rate. Under-reporting of accidents to the HSA varies significantly by sector (Russell et al., 2015) and the Central Statistics Office (CSO) data based on self-reports reveals a different sectoral pattern (see below).

In recent years, manual handling has tended to be the most common cause of non-fatal injuries, contributing about one-third of those reported to the HSA in 2016 (32%), (Figure 2.19). The next most important cause of non-fatal injuries was falling on the same level, accounting for 19% of injuries. Such accidents could include tripping or slipping events that lead to a fall. Incidents involving aggression, fright, shock or violence caused 7% of the non-fatal injury reports to the HSA but were concentrated primarily in the Public Administration and Defence sector and the Health and Social Work sector, where they accounted for 23% and 17% of reported incidents respectively (Figure 2.20).

Despite known under-reporting of accidents in some economic sectors, injuries reported to the HSA provide a consistent record of a subset of work-related injuries and deaths, including important characteristics of the accidents.

CSO module results

Work-related injury

The CSO survey module estimates that 13,198 people experienced work injuries requiring an absence from work of four or more days in 2016. This amounts to a 22% decrease from the 16,905 reported in 2015, and a 30% decrease from the 18,796 reported in 2014. This represents a decrease to 6.5 per 1,000 workers from the rate of 8.6 in 2015 and 9.8 in 2014 (Figures 2.4 and 2.5). The rate of injuries resulting in zero to three days' absence also decreased, from 10.5 per 1,000 in 2015 to 8.7 in 2016. The estimated number of days lost across the economy as a whole in 2016 due to work-related injury was 481,612, down considerably from 810,899 in 2015.²

The Agriculture, Forestry and Fishing sectors had the highest rate of injury causing four or more days' absence from work in 2016 (12.2 per 1,000 workers). Other sectors with relatively high rates of injury were the Construction sector and the Industry³ sector, with rates of 11.2, and 9.3 per 1,000 workers respectively (Figure 2.7). Including less serious accidents (0+ days absence), the highest rates were found in the Agriculture, Forestry

¹ These rates exclude accidents involving non-workers.

² The CSO note that the number of days absent for both injury or illness is subject to error. This caution has been reiterated by the ESRI.

³ Industry represents an amalgamation of the NACE economic sectors B – Mining and Quarrying, C – Manufacturing, D – Electricity, Gas, Steam and Air-Conditioning Supply, and E – Water Supply, Sewerage, Waste Management and Remediation Activities.

and Fishing sector (30 per 1,000) and Public Administration and Defence (24 per 1,000).⁴ Higher injury rates for 0+ days accidents were also found for 2016 in Industry, at 20 per 1,000 workers (Figure 2.6).

For all injuries (0+ days' absence) female workers had lower injury rates than male workers in 2016, although the gap has been narrowing in recent years (Figure 2.12). The injury rates for male workers decreased from 23.0 per 1,000 in 2015 to 17.2 per 1,000 in 2016 and the rate for female workers decreased from 14.4 per 1,000 to 12.9 per 1,000 over the same period. The rate of injury for male workers has fallen 47% since 2013, when it was 32.2 per 1,000 workers, while the rate for female workers has fallen 20% from 16 per 1,000 workers over the same period.

In 2016, non-Irish national workers made up 15.5% of the Irish workforce (Figure 2.17). Of all non-fatal injuries reported to the HSA in 2016, 19% involved non-Irish national workers (Figure 2.18).

Work-related illness

Between 2015 and 2016, the total rate of illness decreased from 21 to 18.8 per 1,000 workers (Figure 2.4). The illness rate causing zero to three days' absence (0–3 days) fell from 11.6 in 2015 to 10.3 per 1,000 workers in 2016, while rates of more serious illnesses involving four or more (4+) days' absence from work also declined, from 9.4 per 1,000 workers in 2015 to 8.5 per 1,000 workers in 2016. Similar decreases in the estimated number of days lost across the economy due to work-related illness were noted, from 912,595 in 2015 to 746,701 in 2016 (Figure 2.4). The number of days lost due to work-related illness has declined by 33% since 2014, although this is still higher than the 595,951 days lost in 2011.

Sectors with the highest illness rates in 2016 (0+ days lost) included Health and Social Work (35 per 1,000 workers), Public Administration and Defence (28 per 1,000) and Agriculture, Forestry and Fishing (24 per 1,000) (Figure 2.8). In 2015, the highest rates of illness were observed in the Health and Social Work sector, followed by the Accommodation and Food Services sector, while in 2014, the highest illness rates were recorded in Agriculture, Forestry and Fishing and the Health and Social Work sector. This suggests that certain economic sectors tend to have consistently higher illness rates over time, with the Health and Social Work sector a prominent example.

Continuing the trend from previous years, in 2016 older workers had higher work-related illness rates than younger workers (Figure 2.14). The rate for workers aged between 55 and 64 years was 46.4 per 1,000, compared with just 18.2 per 1,000 for those aged 25 to 34 years and 17.9 per 1,000 for those aged 35 to 44 years. The rate is lower again for the oldest age group featuring those over 65 years, possibly because older workers with an illness leave the workplace.

Women have reported higher illness rates than men since 2011 (Figure 2.13), although rates of illness among women fell more between 2015 and 2016, from 23.9 to 20.4 per 1,000 workers, than for men over the same period, from 18.6 to 17.4 per 1,000 workers, which has narrowed the gap slightly. Indeed, the rate of illness among women has fallen steadily from 2013 to 2016, decreasing from 34 per 1,000 workers to 20.4 per 1,000 workers compared to men where the decline was from 24.9 per 1,000 workers to 17.4 per 1,000 workers.

⁴ Note that the 0+ figures include all work-related injuries, including those where there was no absence from work as well as longer spells of four or more days.

Fatal injuries

In 2017 there were 47 work-related fatalities reported to the HSA (Figure 3.3). This compares to 46 in 2016,⁵ down from 56 fatalities in 2015, and 55 in 2014. Of the fatalities in 2017, 41 involved workers, with the remaining six involving members of the public, giving a worker fatality rate of 1.9 workers per 100,000 (Figures 3.1 and 3.4), down from the 2016 rate of 2.1 per 100,000 workers and also lower than the 2015 rate of 2.5 per 100,000 (Figure 3.1). The three-year rolling fatality rate has remained relatively stable since 2009, following a downward trend between 1999 and 2009 (Figure 3.1).

The Agriculture, Forestry and Fishing sector was notable in accounting for over half of all fatal accidents in 2017, with 25 worker deaths and one additional non-worker death (Figure 3.2). In 2016, the same sector saw 25 fatalities in total (Figure 3.3). In 2017, the fatality rate for workers in this sector was 22.6 per 100,000 workers – the highest rate since 2014 but lower than the average rate of 26.4 per 100,000 workers for the years between 2010 and 2013 (Figure 3.5).

Five worker fatalities occurred in the Public Administration and Defence sector during 2017, giving a worker fatality rate of 5.1 per 100,000 workers. There were four worker fatalities in the Construction sector, as well as an additional two fatalities to non-workers, making this the sector with the second highest number of fatalities since 2013. (Figure 3.4). This translates into a worker fatality rate in 2017 of 3.1 per 100,000 workers, down from the rate of 6.6 recorded in 2016 and 8.0 in 2015.

In recent years, self-employed workers have tended to have higher rates of fatal injury than other workers. Of all accidents in 2017, 18 involved self-employed workers (38% of all fatalities), including 12 farmers, two in the Transportation and Storage sector, two in the Wholesale and Retail Trade sector and the remaining two are split between the Accommodation and Food Service Activities sector and the Fishing sector (Figure 3.4).

Older workers were disproportionately likely to experience fatal accidents compared with other age groups. Figure 3.7 shows that over half of the fatal accidents in the Agriculture, Forestry and Fishing sector happened to workers in the 65+ age group, and across all sectors the highest number of accidents occurred in this group (43%), which represents a considerable increase for this group compared with 2016.

Of 41 worker fatal accidents in 2017, 2 (5%) involved non-Irish nationals (Figure 3.10). The fatality rate for non-Irish national workers was 0.6 per 100,000, compared to a rate for Irish workers of 2.1 per 100,000 (Figure 3.11). This represents a lower rate for non-Irish nationals for any year since 2010.

The latest European statistics on fatality rates refer to the year 2015. These figures, compiled by Eurostat, report a fatality rate of 2.5 per 100,000 workers for Ireland, the fifth highest rate among the EU15 and higher than the EU15 average of 1.6 per 100,000 (Figure 3.14).

Implications

Notwithstanding the CSO's recent revision of labour force data,⁶ and the fact that rates of injury and illness reported by the CSO are prone to chance year-to-year fluctuation, the decrease in these rates for both non-fatal injuries and illnesses for the two consecutive years 2015-2016 is positive.

⁵ The 2015-2016 statistics report reported 45 fatal accidents in 2016. One additional fatal accident was recorded for the year 2016 following the publication of that report.

⁶ Note that from Q3 2017, the labour force survey (LFS) replaced the Quarterly National Household Survey (QNHS). This includes adjustments to the historic QNHS data series to take account of revisions to population estimates arising from the 2016 Census of Population. In addition, adjustments have been made to this historic data to ensure comparability with the new LFS for headline indicators. This caused an increase in the reported numbers employed but, for continuity with previous statistics reports, data reflecting the years preceding 2017 have not been updated in this report. As a result, rates in 2017 may appear slightly lower than previous years, due to the increased size of employment reported by the CSO. However, the total numbers of people employed in the years 2011-2016 in the adjusted data are no more than 5% higher than the previous estimates.

At 47, there was one additional fatal accident in 2017 compared with 2016. Self-employed workers continued to be at greater risk, particularly in the Agriculture, Forestry and Fishing sector, where they represented 13 of the 25 worker victims of fatal accidents. Fatal accidents have tended to be concentrated in a small number of economic sectors, including Agriculture, Forestry and Fishing, Construction, and Transport and Storage, and these three sectors accounted for 79% of all fatal accidents in 2017. The number of fatal accidents has been broadly stable since 2011 but has fallen since the Celtic Tiger economic boom years of 2002-2007, when it averaged at 62 fatal accidents each year. This is a positive development; nevertheless, the deaths of 41 workers and six members of the public, including one child, suggest that work-related fatalities are still a major concern.

Ireland has ranked between fifth and seventh highest within the EU15 worker fatality statistics from 2008 to 2014.⁷ In 2015, it was ranked fifth highest.⁸ In each of these years the Irish rate was above the EU15 average.

The triggers for non-fatal occupational injuries have been relatively stable over recent years, with a few exceptions. Between 2014 and 2016, the Public Administration sector reported an increase in the triggers of 'aggression, shock, violence', from 3.6% to 21.4%; in 2017 it remained high at 22.5%. In the same sector, 'loss of control of transport or handling equipment', increased from 5.4% in 2014 to 12.6% in 2016, followed by a fall to 9.2% in 2017.

Among fatal accidents, the most common trigger in 2017 was the loss of control of a means of transport or handling equipment, which accounted for 21 (44.7%) of fatalities and was also the most common trigger in 2016. Other important triggers for fatal accidents in 2017 included falls from height (five fatalities), person in an inappropriate area, typically where a person enters a dangerous area such as behind a reversing vehicle (four fatalities) and the loss of control of an animal, usually involving cattle on farms (four fatalities). Falls from height were the second most common trigger causing fatal accidents in 2016; in 2015 falls from height were the most common trigger of fatal accidents along with the loss of control of means of transport or handling equipment, each causing eight fatal accidents.

Generally, a small number of triggers are responsible for the majority of both fatal and non-fatal accidents, and these are often related to the nature of the economic activities undertaken in different sectors. The relative stability of triggers across economic sectors highlights the potential to predict and prevent such accidents.

Findings from other sources

In 2018, the Economic and Social Research Institute (ESRI) undertook an analysis of work-related injury and illness trends for five high-risk economic sectors from 2001 to 2014 (Kenny et al., 2018). These sectors, accounting for 41% of employment and 56% of work-related injury in 2014, were Agriculture, Forestry and Fishing; Construction; Health and Social Work; Transport and Storage; and Industry. This research explored the characteristics of victims of injury and illness, as well as some of the characteristics of the kinds of work associated with injuries and illnesses.

Injuries

Overall rates of injuries fell for Agriculture, Forestry and Fishing, Construction and Industry during the recession period from 2008-2011 compared with the economic boom period of 2001-2007. There is some evidence that injury rates may have increased during the recovery period since 2012, but these are as yet inconclusive.

⁷ It was seventh highest in 2008 and 2009, sixth highest in 2010, seventh highest in 2011, sixth highest in 2012 and 2013 and fifth highest in 2014.

⁸ Some of these ranking positions may be inconsistent with those reported in the Statistical Summaries for previous years due to data being updated by Eurostat.

The highest number of days lost due to injury per person were in the Transport sector (766 days per 1,000 workers), followed by Construction (532) and Agriculture, Forestry and Fishing (413).

Analysis of the circumstances of injuries revealed that higher risk was associated with night workers, shift workers, new recruits and longer working weeks. After adjusting for worker and job characteristics, Construction staff working between 40 and 49 hours per week were more likely to experience injuries than those working fewer hours. Meanwhile, in the Health sector, 3.7% of shift and night workers experienced work-related injuries, compared with only 1.9% of Health workers not doing shift or night work.

In each of these five high-risk economic sectors, work-related injury rates were higher for those with less experience. New recruits in Industry, with less than six months working in their job, were more likely to experience injuries (9.3%) than those with other lengths of work experience (2.5-3.3%). The pattern is similar in Construction, with 15.3% of new recruits experiencing a work-related injury compared with an average among other groups of 4-5%, and in Health where 9.3% of new recruits reported injuries, compared with only 2.6% of those working in that job for more than five years. This may suggest that inexperience is an important factor in the risk of experiencing a work-related accident.

Fatal accidents were highly concentrated within the Agriculture, Forestry and Fishing sector, the Construction sector, the Transport and Storage sector, and the Industry sector, together representing 85% of all fatal accidents in 2014. Rates tended to decline over the period 2001-2014 for each of the major economic sectors except Agriculture, Forestry and Fishing, where it reached a high of 29.5 per 100,000 workers in 2011, followed by a decline to 20.9 per 100,000 in 2014.

Illnesses

As with injuries, work-related illness rates tended to decline following the end of the economic boom of 2001-2007, although there are some indications that rates may have risen slightly in the most recent period of economic recovery from 2012-2014. Days lost due to work-related illness per person were highest in Health (524 days per 1,000 workers), followed by Transport and Storage (507) and Agriculture, Forestry and Fishing (358). Like the pattern of injuries, night and shift work were associated with higher risks of work-related illness in the Health sector, where the most common work-related illnesses were musculoskeletal disorders. In Health, 4.2% of those working night or shift work reported work-related illnesses, compared with just 2.9% for others. In other sectors, night or shift work were not significantly associated with higher risks of work-related illness.

Shorter working weeks were associated with higher risks of work-related illness per hour worked in several economic sectors. In Transport and Storage, those working fewer than 30 hours per week were significantly more likely to experience work-related illnesses (8.9%) compared with those working other lengths (2.1-3%). This pattern is shared by other sectors, such as Agriculture, Forestry and Fishing, where 9.8% of those working fewer than 30 hours per week experienced work-related illnesses, compared with other groups (2.5-4.9%). It is possible that lower occupational ranking staff may be more likely to work part-time in some sectors; alternatively, those with an illness may be forced to reduce their working hours.

Working experience also appears to impact risk of work-related illness, with those working less than six months in Construction significantly more likely to report experiencing illness in the preceding 12 months (16.5%) compared with more experienced groups (2.5-3.4%). Similar patterns were apparent in other sectors, with inexperience broadly associated with higher risks of illness.

For Construction workers, incidence of work-related illness increased with age, with workers under 25 years significantly less likely (1.0%) to experience illnesses in the preceding 12 months compared with other groups (between 2.0% and 4.3%). This pattern was similar in Agriculture, Forestry and Fishing, where younger workers under 25 years (1.9%) were less likely to experience illnesses compared with workers over 44 years (4.9-5.4%).

In general, higher rates of inspections of workplaces by the HSA were associated with lower risks of work-related injuries and illnesses.

These analyses suggest that the risk of work-related injury and illness is related not just to the nature of activity undertaken by workers in each of the different economic sectors, but also the circumstances of that work, including working hours, work experience, night/shift work, employment status and age. (All of these reports are available from the HSA website, along with Plain English summaries prepared by the National Adult Literacy Agency (NALA).)

Long latency illnesses

Note that fatality statistics presented here exclude deaths resulting from long-term work-related illnesses, including cancer. It is likely that the number of deaths due to work-related long-latency disease is considerably higher than the number of deaths due to work-related injuries. In the United Kingdom, 137 workers had fatal accidents in 2016/17 (HSE, 2017), while there were 2,496 deaths due to mesothelioma alone in 2016 (Cancer Research UK, 2018). Since the great majority of mesothelioma cases are considered to be work-related, this indicates the major importance of long-latency illnesses to worker health and safety (see Parkin, 2011).

In Ireland, deaths from pleural mesothelioma have increased steeply in Ireland since 1994, when seven persons were diagnosed and all seven subsequently died, up to 46 diagnoses in 2012, leading to 44 deaths. In 2014, 37 patients were diagnosed with pleural mesothelioma, of whom 18 are known to have died. Most diagnoses were for male patients, 88% between 1994 and 2015 (NCRI, 2018). More information on the incidence of deaths to cancer is available from the National Cancer Registry Ireland's Annual Report (NCRI, 2017).

1.3 Data sources and methodology

In this report, HSA results refer to the year 2017, while the QNHS results only reach 2016 and Eurostat data to 2015. No one source provides a comprehensive picture of occupational injury and illness, so the strengths and limitations of each dataset are described.

Health and Safety Authority (HSA)

Employers are legally required to report incidents to the HSA when injuries result in four or more days' absence from work, so the HSA figures represent more serious accidents that warrant such an absence from work.⁹ Incidents related to a place of work or a work activity in which a member of the public is injured are also reportable to the HSA, in cases which, due to the nature or severity of the injury or condition, results in the person being taken from the location of the accident to receive treatment in respect of that injury in a hospital or medical facility.¹⁰ In the tables based on the HSA data that follow, the table headings and notes will indicate whether the figures include or exclude 'non-workers'.

Comparison of HSA data with CSO estimates of work-related injuries suggests underreporting of injuries to the HSA, particularly in certain economic sectors. In 2016, 8,381 non-fatal worker injuries were reported to the HSA (HSA, 2017) while the CSO reported 13,198 work-related accidents that resulted in four or more days' absence from work for the same period (Figure 2.4).

By comparing incidents reported to the HSA with those recorded by the CSO, under-reporting has been identified as particularly prominent among the self-employed and smaller employers. Under-reporting also

⁹ It should be noted that this refers to calendar days, so if one misses work on Friday and Monday due to the same injury, it is counted as four days (Friday, Saturday, Sunday and Monday).

¹⁰ For further information see http://www.hsa.ie/eng/Topics/Accident_and_Dangerous_Occurrence_Reporting/#reportableaccidents.

varies considerably between various economic sectors, hence, CSO estimates are considered the most reliable source of data when comparing accident rates between sectors.

QNHS module on work-related accidents and illness

Since 1998, the CSO has conducted an annual special module on work-related accidents and illnesses within the QNHS, though in its earliest years only a small number of questions were included. In Quarter 1 of each year (except 2013, which is not strictly comparable with other years), around 16,000 households are surveyed and if the respondent is in employment or has worked in the previous 12 months and is aged 15 and over, questions are asked regarding work-related accidents and illnesses that occurred during the 12 months of the previous year. The module consists of 12 questions that detail the incidence of accidents and illnesses, the nature of these and the days of work lost. They also feature the economic sectors in which the respondents work, and further demographic variables are available for analysis by combination with the core QNHS, including gender, age, occupation, nationality and NUTS region.¹¹

The most recent data come from the module that was held in Q1 2017, the reference period being 2016. Respondents were asked if they had experienced any injuries at work, or illnesses/disabilities that were caused by or exacerbated by work. The data in the QNHS are re-weighted to reflect the national distribution of the population and are grossed up to reflect the actual numbers in employment. Note that the small number of respondents experiencing injuries and illnesses in the unweighted data means that caution should be exercised when interpreting differences between groups and changes over time.

Eurostat statistics

Eurostat is the statistical agency of the European Union, promoting the harmonisation of statistical methods across the Member States. Eurostat has laid down the methodologies employed by all Member States for capturing information and producing statistics in relation to occupational injuries and diseases. European Statistics on Accidents at Work (ESAW) is the main data source from Eurostat and provides data on accidents based on administrative data from the Member States. The data comes from national registers, public insurance/social security schemes or national bodies responsible for the collection of data on accidents at work, and is reported in Figures 2.10 and 3.14 below, with the most recent data relating to the year 2015.

The Irish data comes from the reports to the HSA; however, the number of worker accidents (and the rates) cited by Eurostat differ from the HSA figures. For example, the Eurostat figure for Ireland in 2015 is 16,681 for worker accidents resulting in more than four days' absence, while the HSA figure is 7,775 or 7,443 excluding non-workers; see Figure 2.25a in HSA (2016). The difference arises because in countries without an insurance-based system (including Ireland), Eurostat adjusts the figures to take account of under-reporting, using data derived from the CSO's QNHS module on work-related accidents and illnesses. Eurostat also calculates the harmonised rates for a subset of sectors, excluding Public Administration, Health, Education and Mining/Quarrying, because these workers are not covered in many Member States.

The harmonised statistics produced by Eurostat are available at:

<http://ec.europa.eu/eurostat/web/health/health-safety-work/data/database>

Occupational injury benefit statistics

Figures on the number of claims for occupational injury benefits (OIB) are provided by the Department of Employment Affairs and Social Protection (DEASP), representing claims made by insured persons who are injured during the course of their work.

¹¹ Nomenclature of Territorial Units for Statistics, a standard for referencing national sub-regions. In Ireland these are: Border, Midlands, West, Dublin, Mid-East, Mid-West, South-East and South-West.

Since January 2014, the rules of the scheme have changed so that payment is made from the seventh day of incapacity of work, rather than an earlier rule that initiated payment from the fourth day of incapacity. This led to a drop in the number of claims between 2013 and 2014 (Figure 2.9). Since then, the number of claims has increased slightly, to 10,485 in 2016 and 10,739 in 2017, from 9,768 in 2014; however, this 2016 figure is still nearly 700 claims below the number claiming under the old rules in 2013.

Due to these changes in eligibility requirements, the number of paid days is not comparable across the period. Since only those with more serious injuries receive the benefit, the 'total claim duration' is affected since only longer losses of work are included. This greater selectivity is likely to account for much of the increase in the average total duration of absence among claimants (including non-paid days), which increased from 47 to 57 days between 2013 and 2014. Between 2016 and 2017, the average total duration did not change, remaining at 60 days.

Note that not all workers are covered by social insurance and, in particular, fewer self-employed workers are covered by the OIB system. Even among those insured, not all injuries result in a claim.

1.4 Calculating accident, illness and fatality rates

In order to take account of changes in the level of employment, the rates of non-fatal injury and illness are calculated per 1,000 workers. Fatality rates, being much less frequent, are calculated per 100,000 workers.

In this report, rates have been calculated using the average level of employment across the four quarters of the relevant year, that is, for 2016 data employment levels were calculated across the four quarters – Q1 2016 to Q4 2016. For fatal accidents occurring in 2017, employment levels were calculated in the same way, taking an average employment figure across the four quarters – Q1 2017 to Q4 2017.

In 2018, the CSO undertook a revision of labour force data using new population information from the 2016 Census. This caused an increase in the estimated numbers employed for the year 2017. Due to this, accident rates in 2017 may seem slightly lower than rates in previous years. For further information, see CSO 2018.

1.5 Technical notes

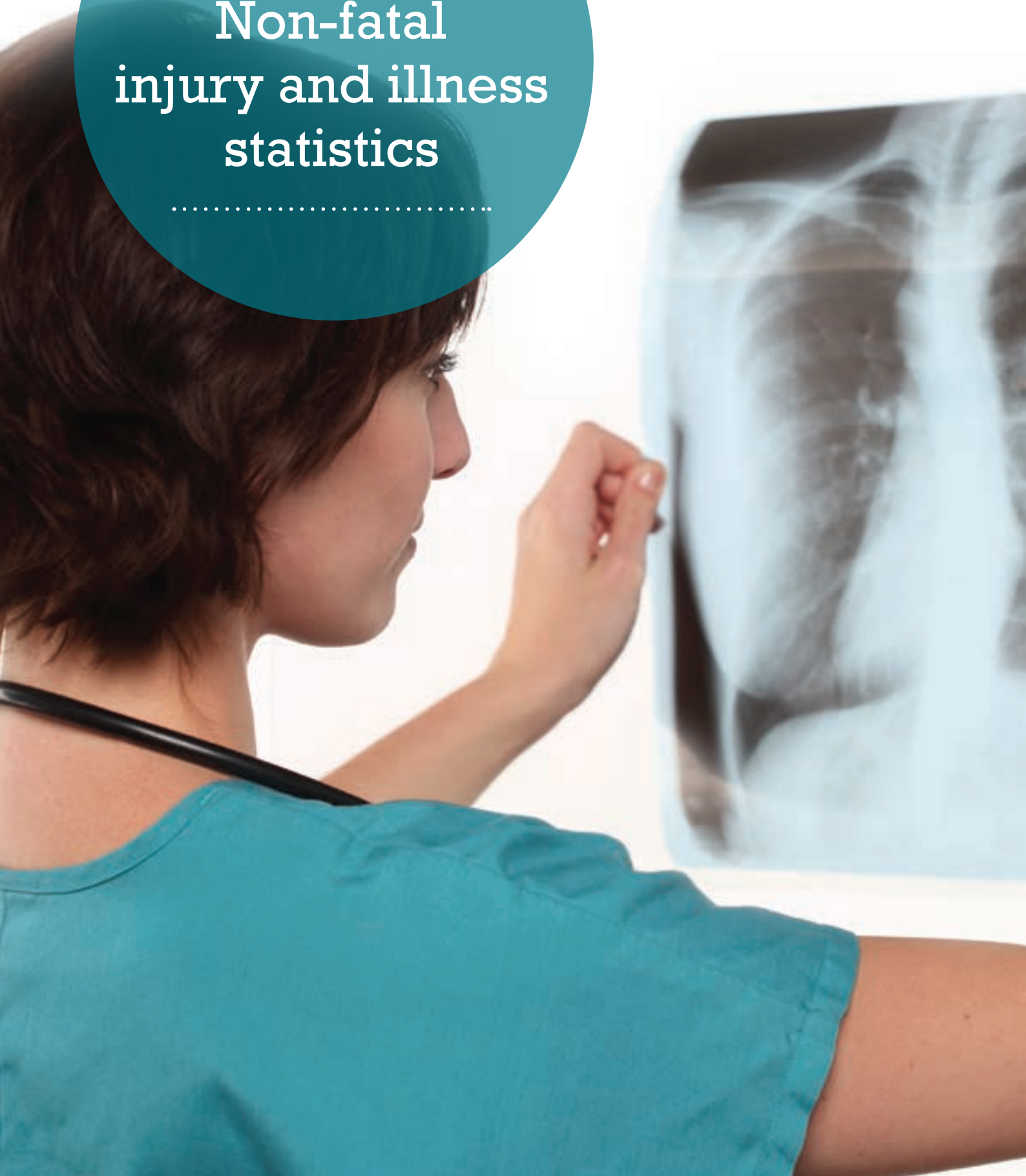
The HSA and the CSO use the following standard international classifications for statistics.

- **Economic activity:** NACE (*Nomenclature statistique des activités économiques dans la Communauté Européenne*: Statistical Classification of Economic Activities in the European Community), maintained by Eurostat (Statistical Agency of the European Commission). The full classification is available to download from the Eurostat website:
<http://ec.europa.eu/eurostat/en/web/products-manuals-and-guidelines/-/KS-RA-07-015>.
- **Occupation:** ISCO (International Standard Classification of Occupations), maintained by ILO (International Labour Organization). Further information on ISCO codes can be found on the ILO website:
<http://www.ilo.org/public/english/bureau/stat/isco/index.htm>.
- **Other information:** European Statistics on Accidents at Work (ESAW) provide information on variables, definitions and classifications relating to the victim, the incident and the circumstances of the incident. It is maintained by Eurostat: <http://ec.europa.eu/eurostat/documents/3859598/5926181/KS-RA-12-102-EN.PDF/56cd35ba-1e8a-4af3-9f9a-b3c47611ff1c>.

2

Non-fatal injury and illness statistics

.....



2.1 General injury and illness statistics

Figure 2.1: Injuries reported to the HSA, 2007–2017

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Non-fatal accidents	8,303	8,069	7,002	7,583	7,094	6,804	6,598	7,431	7,775	8,381	9,143

Source: HSA database

The figures reported in Figure 2.1 differ somewhat from those reported in the previously published HSA annual statistics reports. There are two reasons for this discrepancy. Previously published figures for the years 2004 to 2009 included 'dangerous occurrence' figures and these have now been removed. Secondly, some of the figures for more recent years have been adjusted to include incidents that occurred within the relevant calendar year but were reported late to the HSA.

Figure 2.2: Injuries reported by economic sector, 2017 (HSA)

	Workers		Non-workers		All	
	N	%	N	%	N	%
Q-Health and social work	1,736	19.9%	57	13.1%	1,793	19.6%
C-Manufacturing	1,656	19.0%	10	2.3%	1,666	18.2%
G-Wholesale and retail	1,092	12.5%	176	40.6%	1,268	13.9%
H-Transportation and storage	942	10.8%	57	13.1%	999	10.9%
O-Public administration and defence	872	10.0%	16	3.7%	888	9.7%
F-Construction	688	7.9%	14	3.2%	702	7.7%
N-Admin and support service	381	4.4%	4	0.9%	385	4.2%
P-Education	224	2.6%	60	13.8%	284	3.1%
I-Accommodation and food	214	2.5%	10	2.3%	224	2.4%
S-Other service activities	177	2.0%	11	2.5%	188	2.1%
E-Water, sewerage, waste	186	2.1%	1	0.2%	187	2.0%
A-Agriculture, forestry and fishing	130	1.5%	1	0.2%	131	1.4%
J-Information and communications	99	1.1%	2	0.5%	101	1.1%
M-Professional, scientific and technical	83	1.0%	0	0.0%	83	0.9%
K-Financial and insurance	69	0.8%	8	1.8%	77	0.8%
B-Mining and quarrying	63	0.7%	0	0.0%	63	0.7%
R-Arts, entertainment	43	0.5%	4	0.9%	47	0.5%
D-Electricity, gas, etc.	30	0.3%	0	0.0%	30	0.3%
L-Real estate	24	0.3%	3	0.7%	27	0.3%
U-Activities of extraterritorial organisations and bodies	0	0.0%	0	0.0%	0	0.0%
All	8,709	100.0%	434	100.0%	9,143	100.0%

Note: Injuries reported for non-workers refer to the economic sector in which the injury occurred, for example a non-worker accident in a shop would be reported under Wholesale and retail.

2 Non-fatal injury and illness statistics

Figure 2.3: Numbers employed in each economic sector, 2011–2016, four-quarter average (data based on CSO statistical release, May 2017)¹

Economic sector	Numbers employed						
	2011	2012	2013	2014	2015	2016	2017 ³
Agriculture, forestry and fishing	82,900	93,800	106,750	108,975	109,850	112,850	110,625
Industry ²	240,325	236,175	240,500	239,000	248,200	257,950	283,200
Construction	107,800	100,825	102,000	109,425	125,425	135,775	128,550
Wholesale and retail trade	273,200	272,925	272,325	272,400	273,850	277,200	302,900
Transportation and storage	94,900	88,525	88,150	89,425	91,825	95,375	93,425
Accommodation and food	116,525	122,825	130,825	137,200	138,000	147,350	163,950
Information and communication	76,325	79,800	80,575	81,350	83,300	86,625	115,550
Financial, insurance and real estate	102,000	100,925	99,300	99,975	100,650	101,375	107,000
Professional, scientific and technical	100,050	103,625	109,600	115,950	116,750	119,175	132,950
Administrative and support services	67,225	61,825	61,675	64,375	65,250	67,900	93,025
Public administration and defence	101,300	96,500	95,350	96,450	99,650	101,100	97,525
Education	144,000	145,925	146,375	149,900	151,250	152,350	160,850
Health and social work	241,175	245,700	246,325	247,200	250,675	252,750	279,850
Other NACE activities	96,875	99,925	99,875	99,325	103,150	105,575	117,625
Not stated	5,450	~	~	4,700	~	~	7,450
Total⁴	1,850,050	1,851,425	1,881,150	1,913,965	1,963,550	2,020,000	2,194,425

Note: ~Refers to instances where cases are too few to report

¹ In 2013, there was a shift in field dates from Quarter 1 to Quarter 2, so for the year 2012 the employment levels were calculated across the four quarters from Q3 2012 to Q2 2013, instead of the calendar annual four quarters.

² Industry = Mining and quarrying + manufacturing + electricity, gas, steam and air conditioning supply + water supply, sewerage, waste management and remediation activities: NACE B to E.

³ Data for 2017 was revised using Census 2016 information and is not strictly comparable to previous years.

⁴ The total four-quarter averages include the 'not stated' figures.

Figure 2.4: Number and rate of people suffering injury and illness, 2011–2016 (CSO)

	2011		2012		2013		2014		2015		2016	
	N	Rate per 1,000	N	Rate per 1,000	N	Rate per 1,000	N	Rate per 1,000	N	Rate per 1,000	N	Rate per 1,000
Total in employment	1,850,05		1,851,43		1,881,15		1,913,90		1,963,550		2,020,000	
Injury												
Total suffering injury	40,097	21.7	35,001	18.9	46,574	24.8	39,319	20.5	37,440	19.1	30,756	15.2
0–3 days' absence	23,254	12.6	17,214	9.3	28,132	15.0	20,523	10.7	20,535	10.5	17,557	8.7
4+ days' absence	16,843	9.1	17,786	9.6	18,442	9.8	18,796	9.8	16,905	8.6	13,198	6.5
Days lost due to injury ¹	590,690		n.a.		758,674		750,011		810,899		481,612	
Illness												
Total suffering illness	48,436	26.2	50,210	27.1	54,867	29.2	49,194	25.7	41,247	21.0	37,921	18.8
0–3 days' absence	28,748	15.5	22,735	12.3	36,039	19.2	25,227	13.2	22,793	11.6	20,776	10.3
4+ days' absence	19,688	10.6	27,474	14.8	18,828	10.0	23,966	12.5	18,454	9.4	17,145	8.5
Days lost due to illness	595,951		n.a.		792,875		1,106,311		912,595		746,701	
Injury and illness												
Total injury or illness	88,533	47.9	85,210	46	101,440	53.9	88,513	46.2	78,687	40.1	68,700	34
Total (4+ days' absence)	36,531	19.7	45,261	24.4	37,270	19.8	42,762	22.3	35,359	18.0	30,300	15
Total days lost	1,186,641		n.a.		1,551,549		1,856,322		1,723,494		1,228,312	

Notes: The days absent in 2012 are not strictly comparable with other years due to changes in response categories (see HSA, 2014, for details). The changes also mean that the total number of days lost cannot be calculated for 2012.

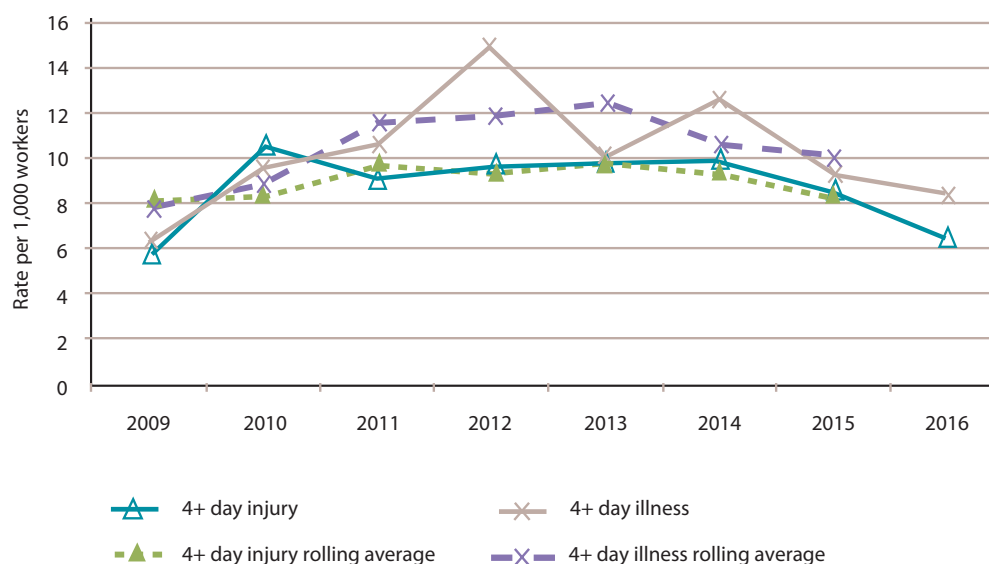
In all the statistics based on the CSO QNHS module that follow, the numbers of injuries and illnesses refer to those in employment at the time of the survey. The estimates are subject to sampling and other survey errors, and estimates and changes over time of a small magnitude can be taken to have lower precision.

n.a.: not available.

¹ Days lost data should be interpreted with care as respondents may have included potential days lost. The figures only refer to the most recent injury or illness.

2 Non-fatal injury and illness statistics

Figure 2.5: Rate of and rolling average for injury and illness causing 4+ days lost per 1,000 workers, 2009–2016 (CSO)



Note: The rate is calculated from the four-quarter average employment for the year, as outlined in Figure 2.3. The increase for the 4+ day illness rate in 2012 is likely due to the change in the format of the question on illness in the 2013 European module (see Russell et al., 2016). Rolling averages are based on an average of 3 years.

Figure 2.6: Rate of injuries (any days lost) per 1,000 workers by economic sector, 2016 (CSO)

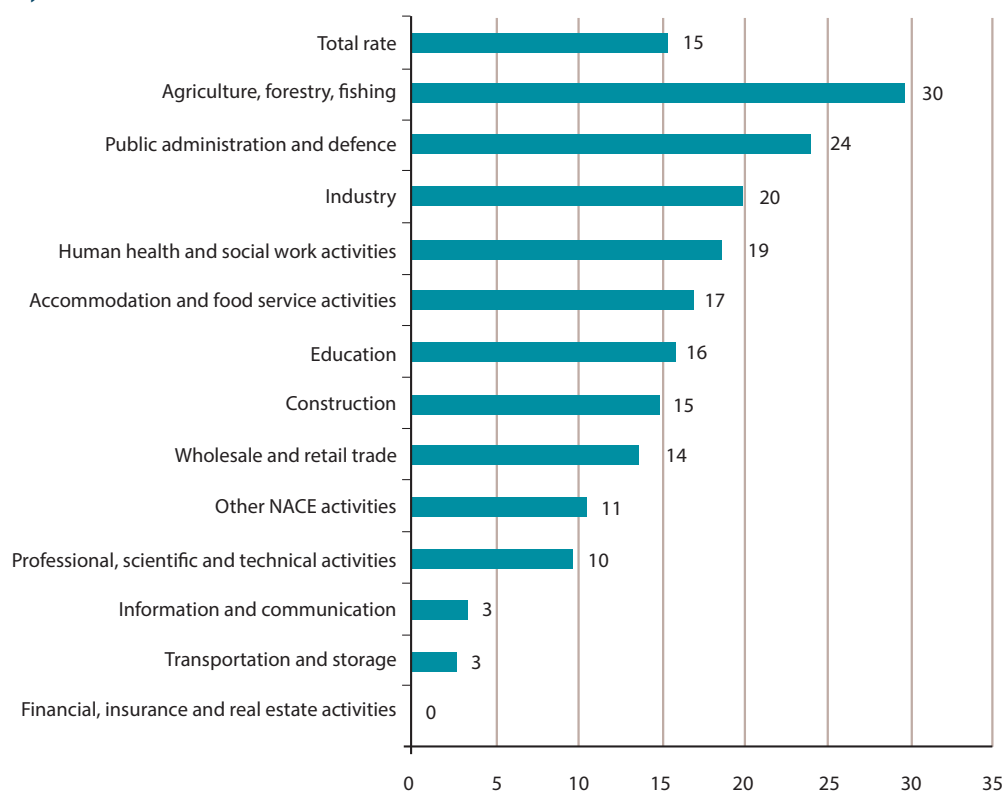


Figure 2.7: Rate of 4+ day injuries per 1,000 workers in selected sectors, 2009–2016 (CSO)

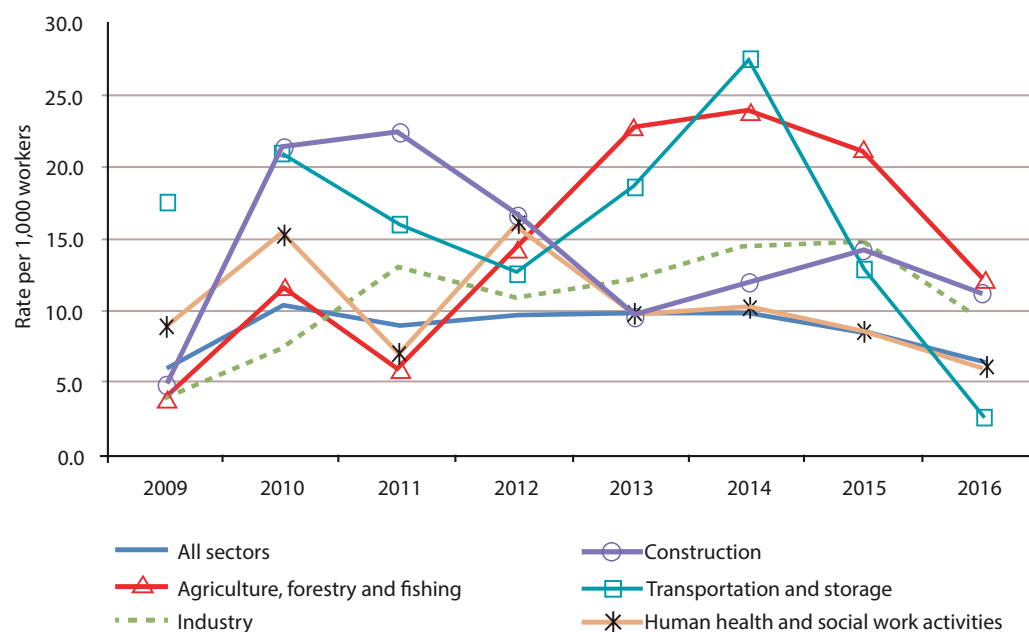


Figure 2.8: Rate of illness (any days lost) per 1,000 workers by economic sector, 2016 (CSO)

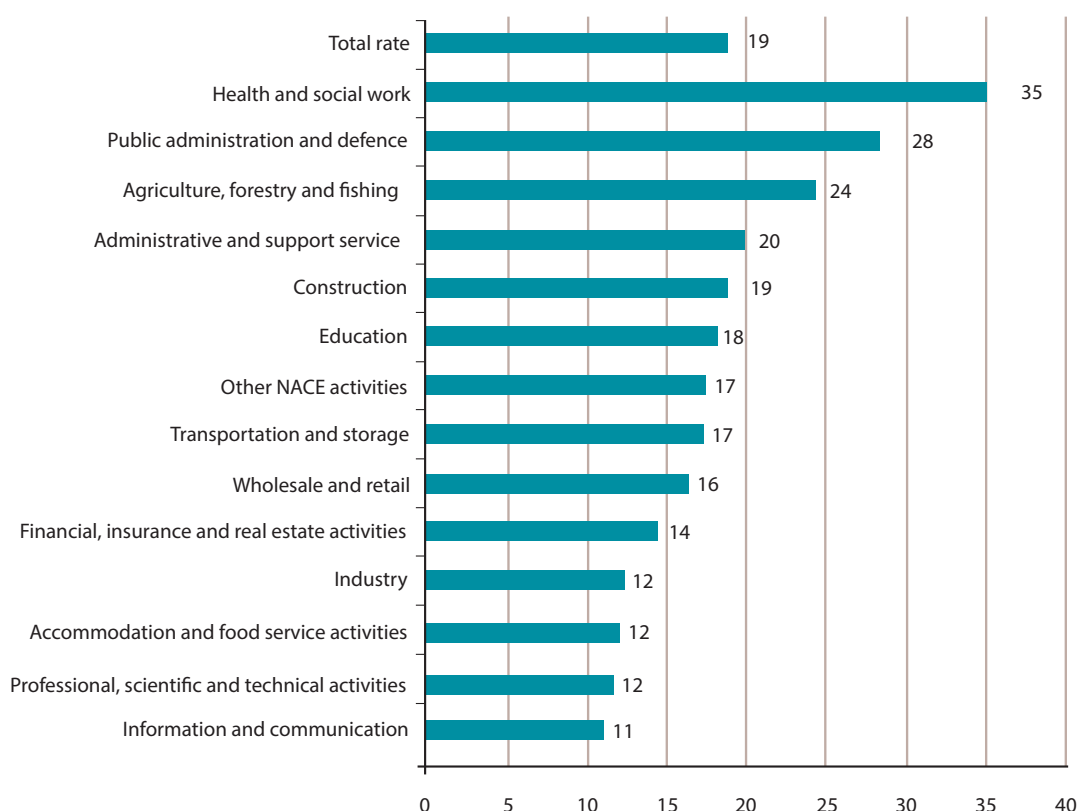


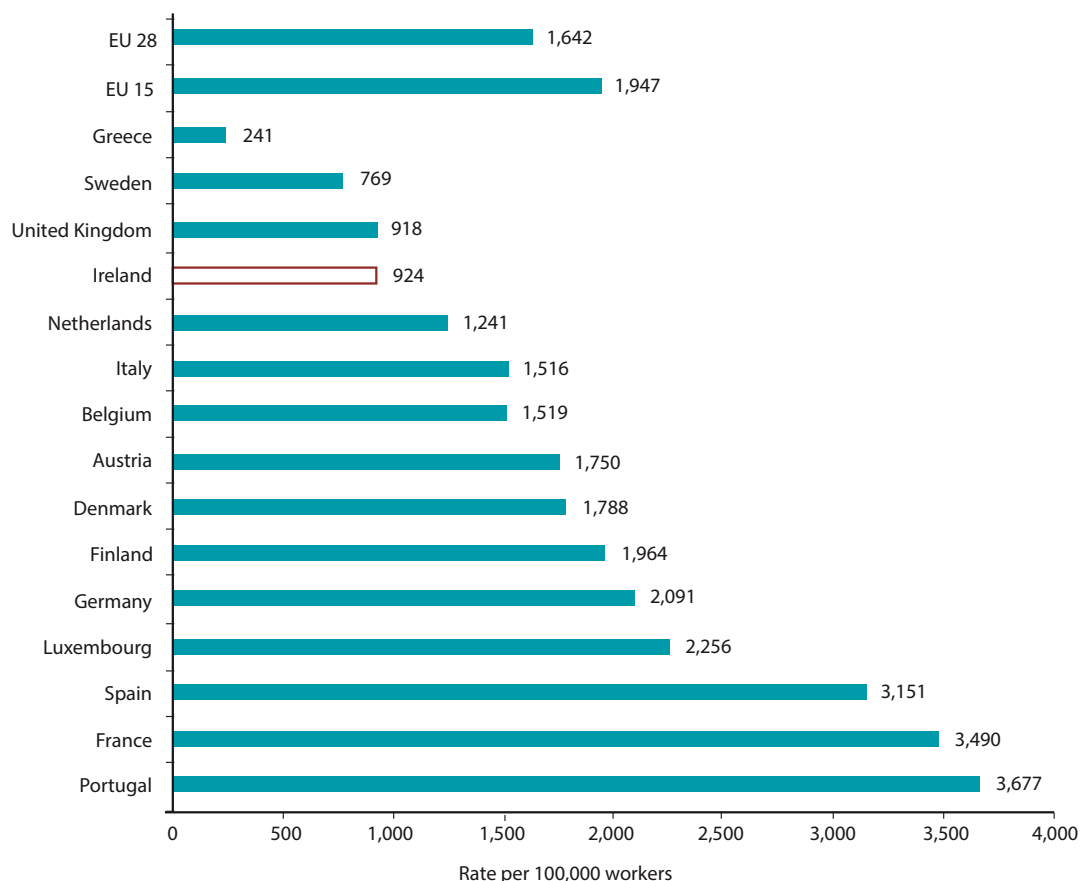
Figure 2.9: Occupational injury benefit claims (DSP), 2000–2017

Year	Claims allowed	Claim days (paid days only)	Avg. duration (paid days only)	Total days lost (incl. unpaid days)	Avg. total duration (incl. unpaid days)
2000	11,995	NO DATA			
2001	12,050				
2002	12,280				
2003	11,096				
2004	11,705				
2005	11,759				
2006	12,416				
2007	13,803	502,178	36		
2008	13,017	494,866	38		
2009	13,099	489,308	38		
2010	11,813	423,394	36		
2011	11,616	406,730	35	506,403	47
2012	10,972	392,436	36	509,831	47
2013	11,428	414,997	37	537,862	47
2014	9,768	414,640	43	550,050	57
2015	10,182	441,091	43	589,067	58
2016	10,485	475,216	45	631,988	60
2017	10,739	492,111	45	653,518	60

Source: Department of Employment Affairs and Social Protection

Notes: : Claim days refers to the number of paid claim days; therefore, up to 2013, these figures do not count the first three days of the claim or Sundays. From 2014 onwards, claims were only paid from the seventh day. Total days lost includes these unpaid days.

Figure 2.10: Rate of 4+ day injuries per 100,000 workers in the EU15 zone, 2015 (Eurostat)



Source of data: Eurostat, Accidents at work by sex and age (NACE Rev. 2, A, C-N) [hsw_mi01]. Last updated 4 April 2018; extracted 12 April 2018

Notes: The Eurostat 4+ injury rates are based on figures submitted by national agencies but are adjusted to take account of different reporting levels across countries (see discussion in Section 1.3 Data sources and methodology).

Other European statistics on persons reporting an accident at work resulting in sick leave and based on the EU-LFS are also available from the Eurostat web site at: <http://ec.europa.eu/eurostat/web/health/health-safety-work/data/database>

2.2 Victim statistics

Figure 2.11: Number and rate of injury/illness (0+ days) per 1,000 workers by economic sector and gender, 2016 (CSO)

Economic sector	Numbers employed (1,000s)		Injury rate per 1000 workers		Illness rate per 1000 workers	
	Male	Female	Male	Female	Male	Female
Agriculture, forestry and fishing	100,175	12,700	30.3	24.9	27.4	~
Industry	182,950	75,000	19.5	21.5	10.8	16.4
Construction	127,950	7,875	16.1	~	18.6	23.1
Wholesale and retail trade	143,575	133,650	17.3	9.7	13.1	20
Transportation and storage	78,175	17,250	3.2	~	18.8	10.3
Accommodation and food services	66,350	81,025	10.8	22	3.8	18.7
Information and communication	61,250	25,400	4.7	~	4.1	28
Financial, insurance & real estate	48,175	53,200	~	~	16.9	12
Professional, scientific & technical	69,175	50,025	10.2	9.3	3.6	22.6
Administrative and support services	37,175	30,725	20.5	6.8	31.6	5.7
Public administration and defence	49,400	51,725	33.4	14.6	27.6	28.9
Education	38,625	113,750	22.7	13.5	17.6	18.3
Health and social-work activities	46,600	206,100	28.4	16.4	46.2	32.5
Other NACE activities	42,875	62,675	25.9	8.8	38.2	3.2
Total	1,095,425	924,575	17.2	12.9	17.4	20.4

Notes: ~indicates that there are too few cases to report. In the case of injury and illness rates this means that there are too few cases to calculate the rate with confidence (ie not that the rate is zero).

Figure 2.12: Rate of total injury (0+ days) per 1,000 workers by gender, 2009–2016 (CSO)

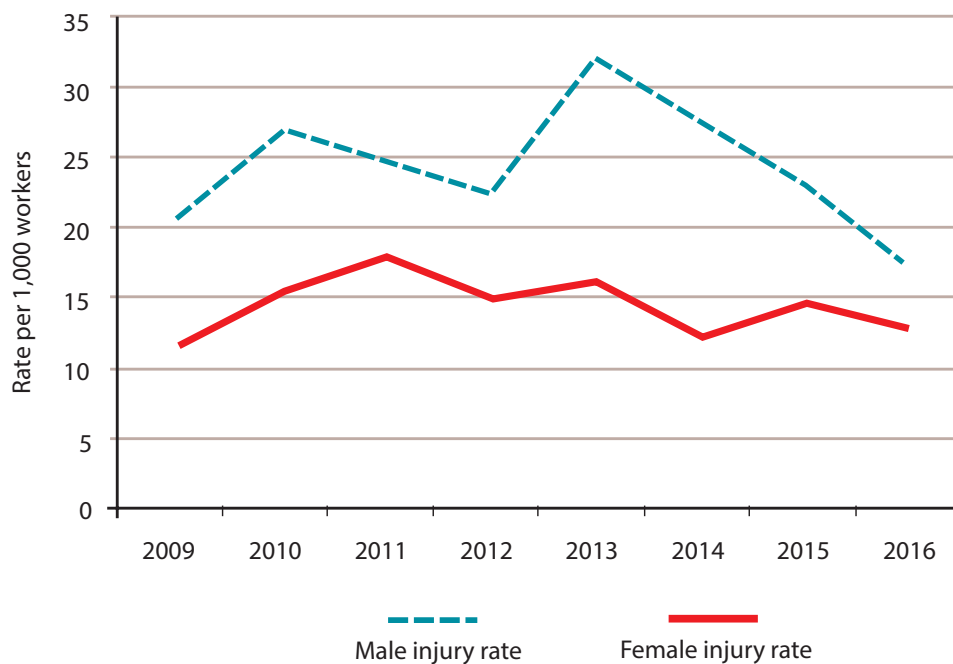
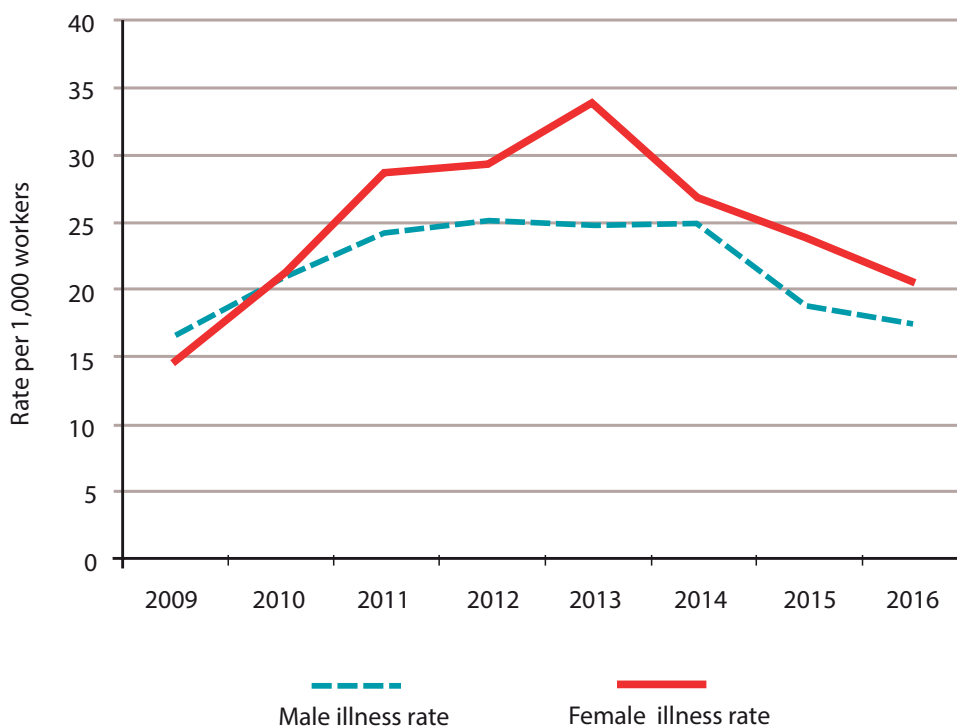


Figure 2.13: Rate of total illness (0+ days) per 1,000 workers by gender, 2009–2016 (CSO)



2 Non-fatal injury and illness statistics

Figure 2.14: Rates of total injury and total illness (0+ days) per 1,000 workers by age band, 2016 (CSO)

Age range	Injury rate 2016	Illness rate 2016
15–19	~	~
20–24	~	~
25–34	11.9	18.2
35–44	11	17.9
45–54	11.8	22.2
55–64	45.6	46.4
65+	19.2	18.5
Total	15.2	18.8

Note: ~ indicates that there are too few cases to report

Figure 2.15: Rates of total injury and total illness (0 + days) per 1,000 workers by occupation, 2016 (CSO)

Occupation	Injury rate 2016	Illness rate 2016
Managers and administrators	13.8	14.2
Professional	12.3	24.8
Associate professional and technical	30.1	34.6
Clerical and secretarial	16.1	12.1
Craft and related	15.1	12.4
Personal and protective service	13.6	15.1
Sales	8.5	8
Plant and machines operatives	3	7.6
Elementary occupations*	20.6	31.1
All occupations	15.2	18.8

Note: * includes elementary agricultural (e.g. farm workers), construction, process plant (e.g. packers), administration (e.g. postal workers), cleaning, security, sales, storage and other occupations. See ONS (2010) for a detailed description of the Standard Occupational Classification (SOC) 2010.

Figure 2.16: Proportion of reported non-fatal injuries by employment status, 2017 (HSA)

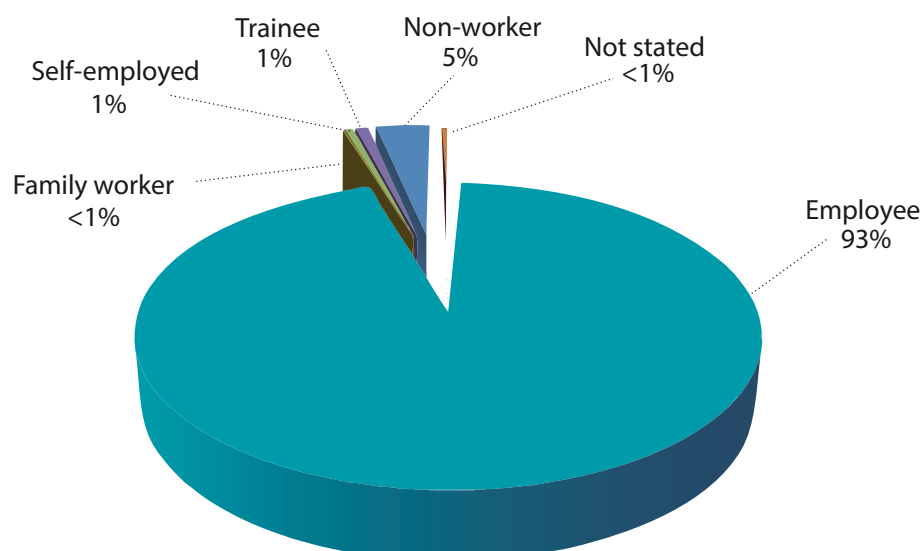
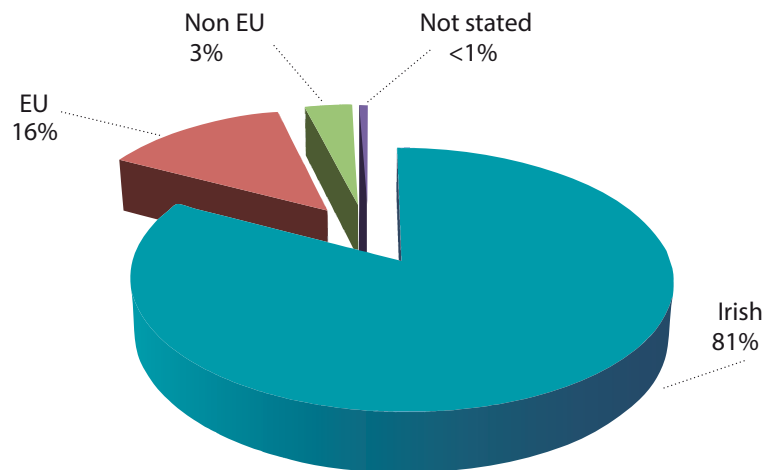


Figure 2.17: Workers by nationality and economic sector, 2016 (CSO statistical release May 2018)

Economic sector	Number of workers		
	Irish	Non-Irish	% non-Irish
Agriculture, forestry and fishing	106,975	5,900	5.2%
Industry	212,725	45,250	17.5%
Construction	116,275	19,500	14.4%
Wholesale and retail trade	230,325	46,875	16.9%
Transportation and storage	82,450	12,925	13.6%
Accommodation and food service activities	94,450	52,925	35.9%
Information and communication	64,425	22,225	25.6%
Financial, insurance and real estate activities	89,000	12,400	12.2%
Professional, scientific and technical activities	102,450	16,725	14.0%
Administrative and support service activities	48,950	18,950	27.9%
Public administration and defence	97,925	~	~
Education	141,800	10,525	6.9%
Human health and social work activities	225,125	27,600	10.9%
Other NACE activities	89,275	16,350	15.5%
Not stated	4,300	~	~
Total	1,706,200	313,800	15.5%

Note: ~ indicates that there are too few cases to report

Figure 2.18: Proportion of reported non-fatal injuries by nationality, 2017 (HSA)



2.3 Nature of accidents and type of injuries sustained

Figure 2.19: Proportion of reported non-fatal injuries by trigger, 2017 (HSA)

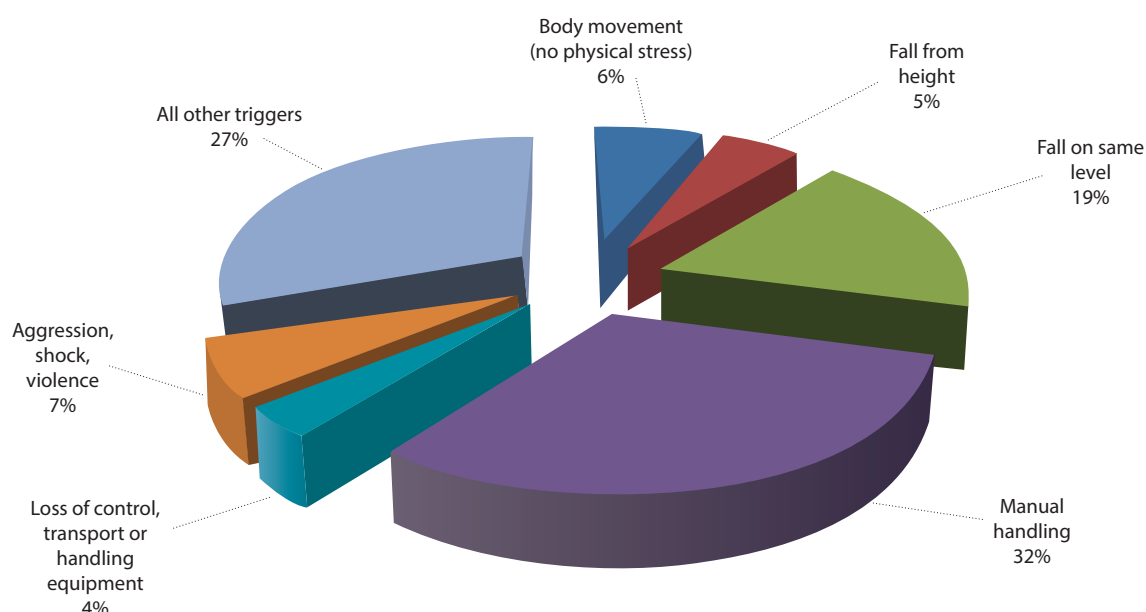


Figure 2.20: Number and percentage of non-fatal accidents by trigger, selected sectors, 2017 (HSA)

	Industry		Construction		Wholesale and retail		Transportation and storage		Public admin and defence		Health and social work	
	N	%	N	%	N	%	N	%	N	%	N	%
Body movement (no physical stress)	127	6.5%	50	7.1%	53	4.2%	85	8.5%	41	4.6%	83	4.6%
Fall from height	77	4.0%	85	12.1%	41	3.2%	48	4.8%	31	3.5%	38	2.1%
Fall on same level	309	15.9%	120	17.1%	314	24.8%	187	18.7%	149	16.8%	333	18.6%
Manual handling	722	37.1%	188	26.8%	568	44.8%	345	34.5%	194	21.8%	536	29.9%
Loss of control – transport or handling equipment	55	2.8%	18	2.6%	40	3.2%	68	6.8%	82	9.2%	44	2.5%
Aggression, shock, violence	3	0.2%	4	0.6%	10	0.8%	24	2.4%	200	22.5%	305	17.0%
All other ¹	653	33.6%	237	33.8%	242	19.1%	242	24.2%	191	21.5%	454	25.3%
Total	1946	100%	702	100%	1268	100%	999	100%	888	100%	1793	100%

¹ Includes a small number of cases where the accident trigger is not recorded.

2 Non-fatal injury and illness statistics

Figure 2.21: Injury type by gender, 2016 (CSO)

	Male		Female		Total	
	Number	Rate	Number	Rate	Number	Rate
Wound or superficial injury	6,957	6.4	3,859	4.2	10,816	5.4
Bone fracture	4,459	4.1	1,282	1.4	5,742	2.8
Dislocation, sprain or strain	5,798	5.3	4,566	4.9	10,364	5.1
Amputation, concussion or internal injury, burn, scald or frostbite	211	0.2	205	0.2	416	0.2
Poisoning or infection, suffocation (asphyxiation), other type of injury, not specified	1,420	1.3	1,999	2.2	3,419	1.7
Total	18,845	17.2	11,910	12.9	30,756	15.2

Figure 2.22: Illness type by gender, 2016 (CSO)

	Male		Female		Total	
	Number	Rate	Number	Rate	Number	Rate
Bone, joint or muscle problem	9,442	8.6	7,343	7.9	16,785	8.3
Breathing or lung problem	963	0.9	728	0.8	1,691	0.8
Hearing problem, headache, eyestrain, heart/circulatory problem, disease	3,890	3.6	3,702	4.0	5,607	2.8
Stress, depression or anxiety	2,823	2.6	2,799	3.0	6,689	3.3
Skin problem, other types of complaint, not stated	1,905	1.7	4,326	4.7	7,149	3.5
Total	19,022	17.4	19,898	21.5	37,921	18.8

Note: Totals may not sum as figures for those in employment are rounded to nearest decimal.

Figure 2.23a: Most injured body parts, 2017 (HSA)

Body part	All		Workers only	
	N	%	N	%
Back, including spine and vertebrae in the back	1985	21.7	1960	22.5
Finger(s)	840	9.2	822	9.4
Leg, including knee	755	8.3	719	8.3
Hand	720	7.9	699	8.0
Ankle	561	6.1	532	6.1
Shoulder and shoulder joints	625	6.8	602	6.9
Arm, including elbow	537	5.9	515	5.9
All others, including unknown	3120	34.1	2860	32.8
Total	9143	100.0	8709	100.0

Figure 2.23b: Most injured body parts, workers, 2017 (HSA)

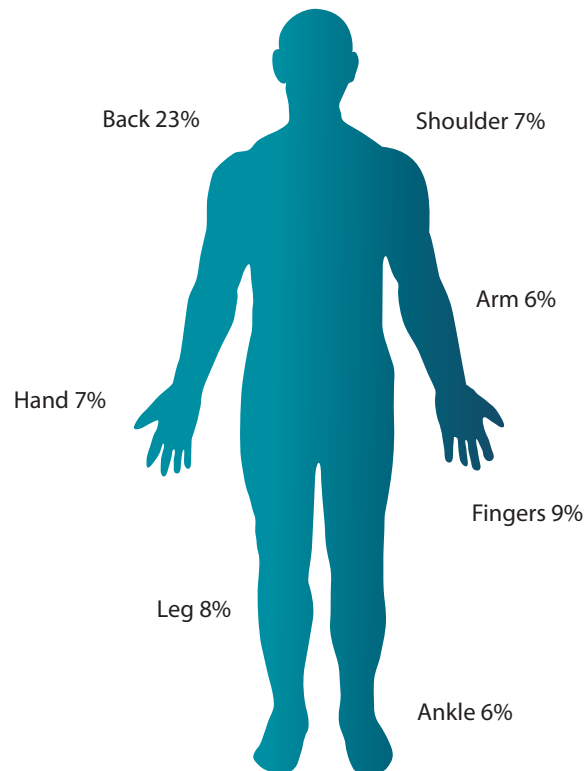
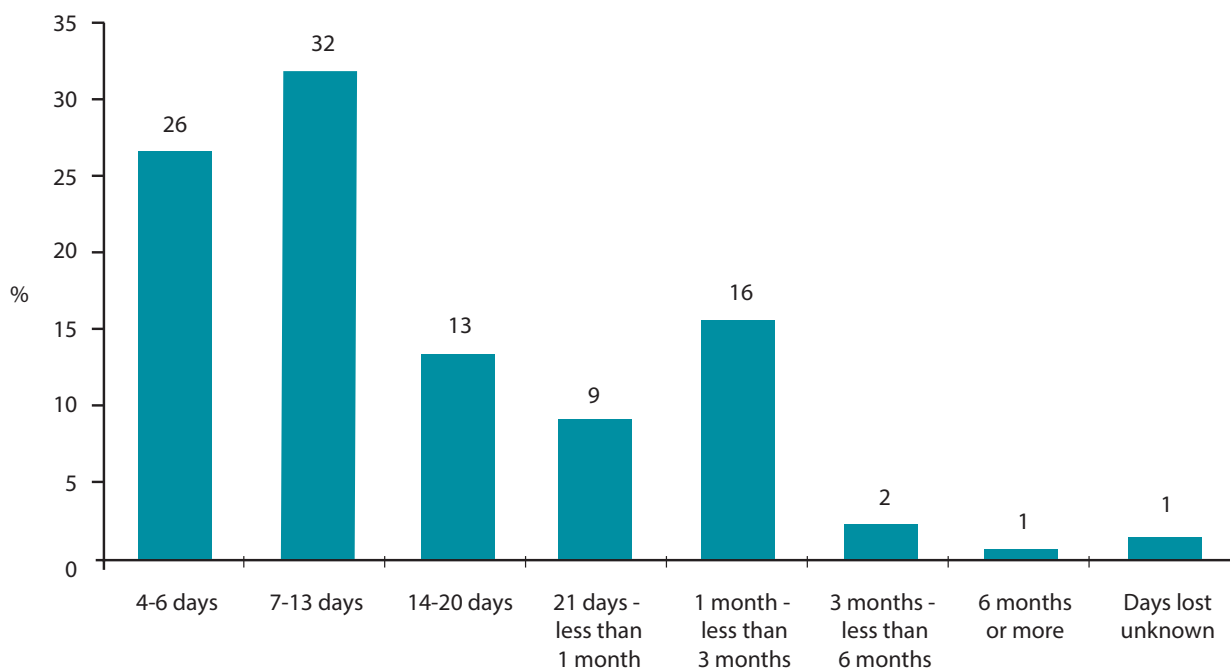


Figure 2.24: Percentage of non-fatal injuries by absence from work, 2017 (HSA)



2 Non-fatal injury and illness statistics

2.4 Work environment statistics

Figure 2.25a: Reported non-fatal injuries by work environment, 2017 (HSA)

	All		Workers only	
	Number	%	Number	%
Construction site	583	6.4	574	6.6
Farming, forestry, fishing (not on vessel)	192	2.1	179	2.1
Hospital and other healthcare	1,546	16.9	1,522	17.5
Public thoroughfare ¹	868	9.5	807	9.3
Production area, factory, workshop	2,386	26.1	2,375	27.3
Area for storage/ loading	377	4.1	372	4.3
Shop, sales, service-activity area	1,714	18.7	1,479	17.0
Other	1,457	15.9	1,381	15.9
Unknown	20	.2	20	.2
Total	9,143	100.0	8,709	100.0

¹ Including the category 'land or rail transport (for example train, bus or car)

Figure 2.25b: Reported non-fatal injuries by work environment, 2017 (HSA)

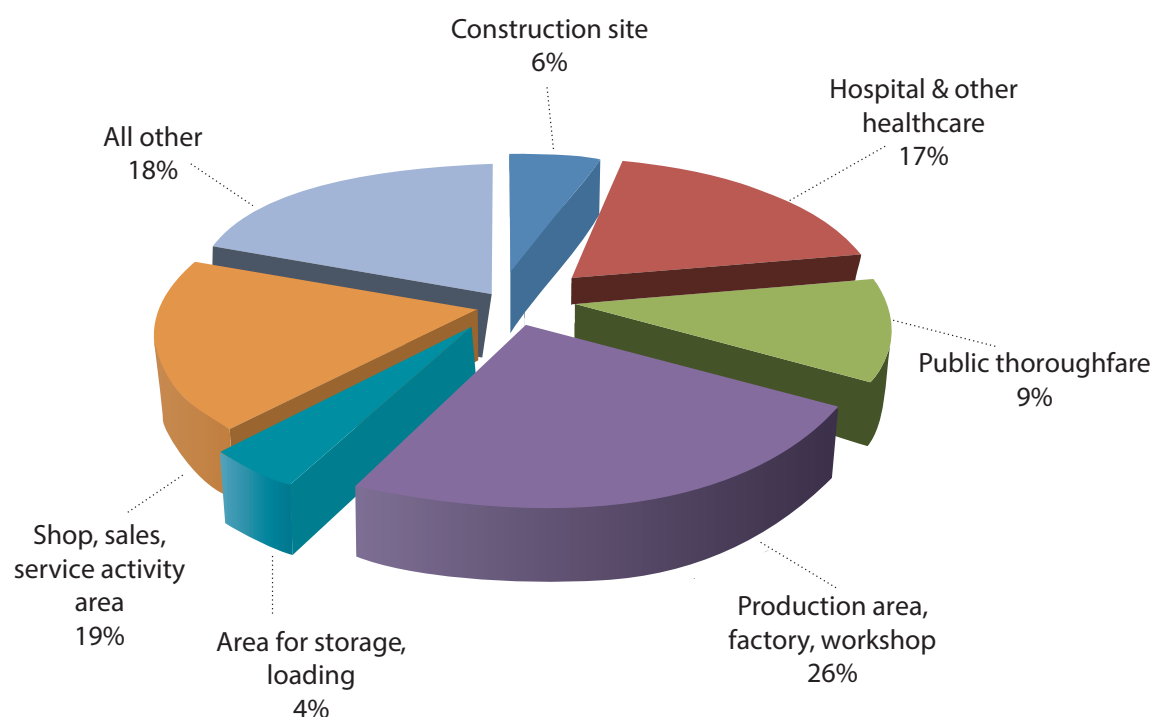


Figure 2.26: Reported non-fatal injuries (%) by size of employing organisation, 2017 (HSA)

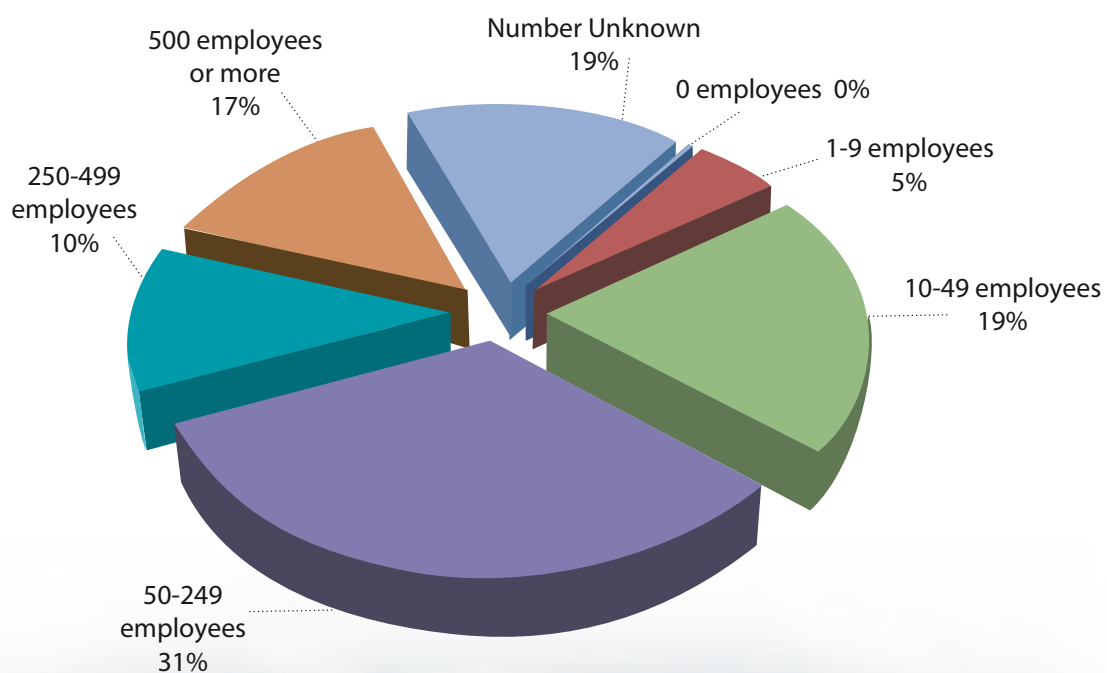


Figure 2.27: Number of non-fatal injury reports by county, 2017 (HSA)

	Non-workers	Workers	Total
Leitrim	2	32	34
Longford	2	59	61
Roscommon	2	70	72
Carlow	4	76	80
Sligo	4	106	110
Monaghan	5	114	119
Tipperary North	6	117	123
Donegal	9	115	124
Kilkenny	4	135	139
Tipperary South	2	148	150
Laois	8	153	161
Clare	4	160	164
Mayo	10	167	177
Cavan	4	184	188
Offaly	15	177	192
Westmeath	6	188	194
Wicklow	20	176	196
Waterford	11	194	205
Kerry	9	203	212
Louth	19	197	216
Wexford	10	225	235
Meath	9	326	335
Galway	13	341	354
Limerick	18	381	399
Kildare	23	521	544
Cork	40	920	960
Dublin South	63	1573	1636
Dublin North ¹²	112	1647	1759
Unknown	0	4	4
Total	434	8709	9143

¹² In statistics reports for 2014-15 and 2015-16, Dublin North was erroneously divided between "Dublin North" and "Dublin".

Figure 2.28: Rate of illness and injury by region, 2016 (CSO)

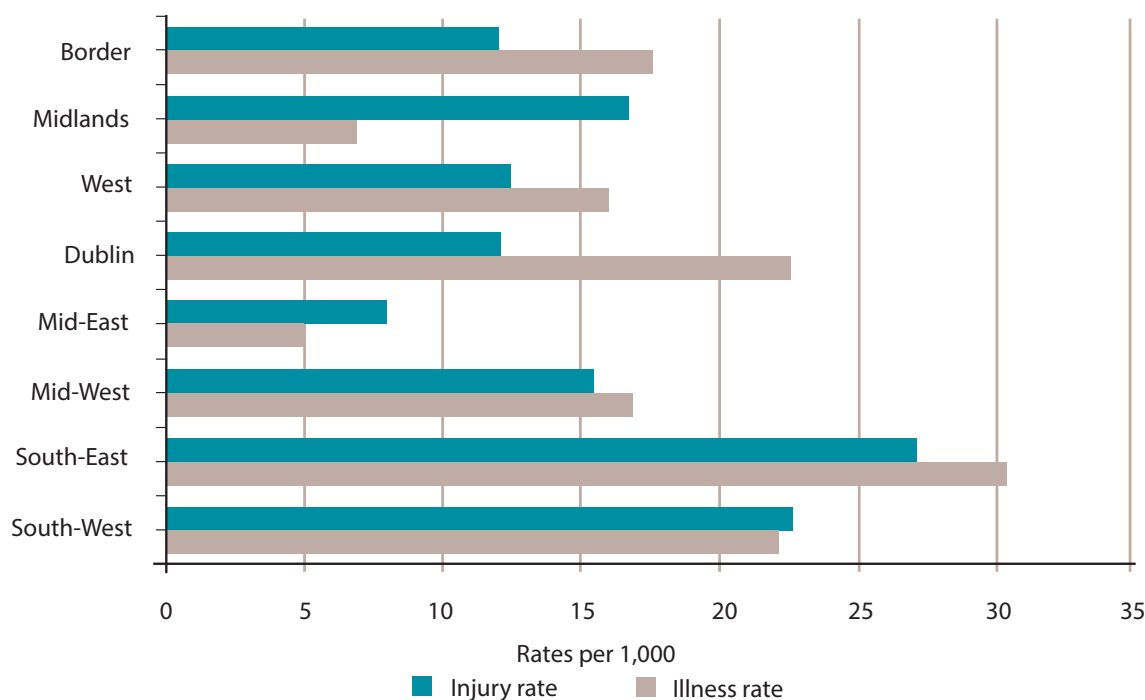


Figure 2.29: Number and rate of people suffering injury (0+ days) and illness (0+ days) by region, 2016 (CSO)

Region	Total employed	Injury (0+ days)		Illness (0+ days)	
		Number	Rate per 1,000	Number	Rate per 1,000
Border	196,600	2,356	12.0	3,445	17.5
Midlands	118,925	1,983	16.7	804	6.8
West	184,100	2,282	12.4	2,951	16
Dublin	620,150	7,443	12.0	14,005	22.6
Mid-East	238,675	1,890	7.9	1,176	4.9
Mid-West	159,575	2,466	15.5	2,684	16.8
South-East	212,025	5,762	27.2	6,446	30.4
South-West	289,975	6,572	22.7	6,410	22.1
All	2,020,000	30,756	15.2	37,921	18.8

Notes: The employment figures that are used to calculate the employment rates come from a household survey (QNHS) so they refer to the region where people reside rather than where they work. Totals may not sum as figures for those in employment are rounded to nearest decimal.

Border: Cavan, Donegal, Leitrim, Louth, Monaghan, Sligo

Midlands: Laois, Longford, Offaly, Westmeath

West: Galway, Mayo, Roscommon

Dublin: Dublin

Mid-East: Kildare, Meath, Wicklow

Mid-West: Clare, Limerick, Tipperary North

South-East: Carlow, Kilkenny, Tipperary South, Waterford, Wexford

South-West: Cork, Kerry



3

Fatal injury statistics

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Figure 3.1: Rate of worker fatalities per 100,000 workers 1998–2017 (HSA)

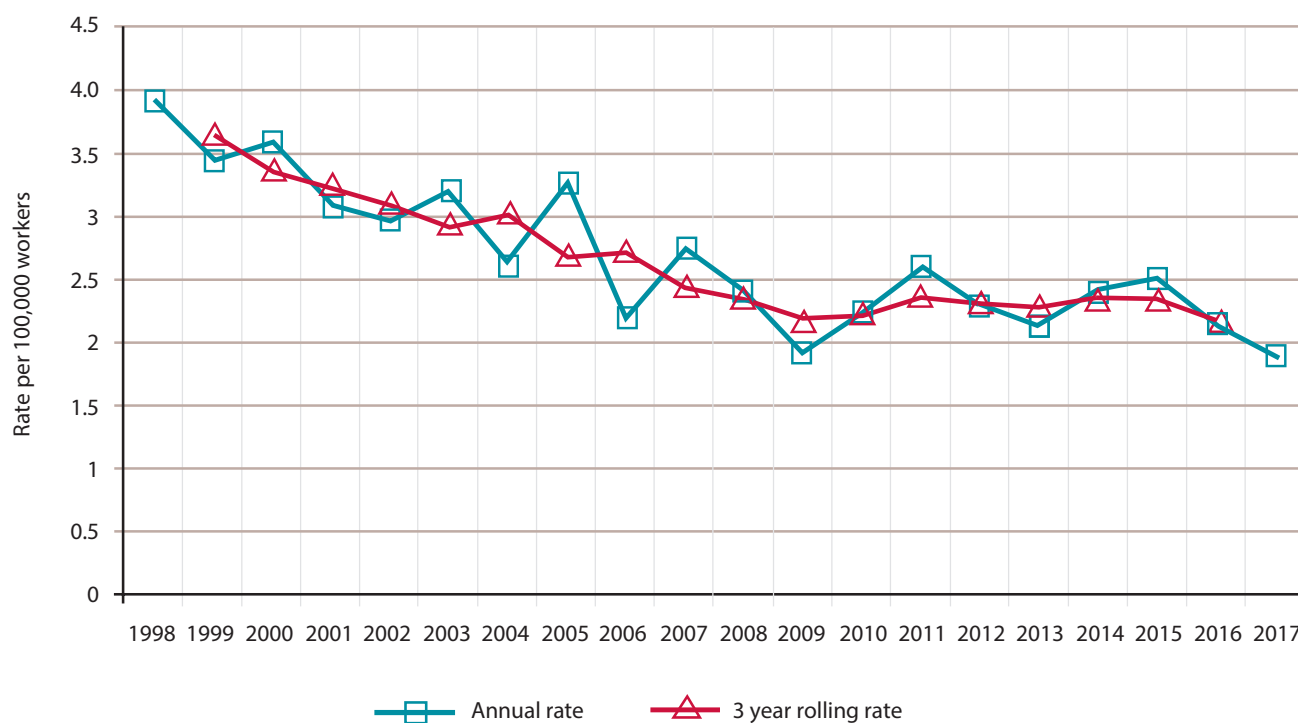
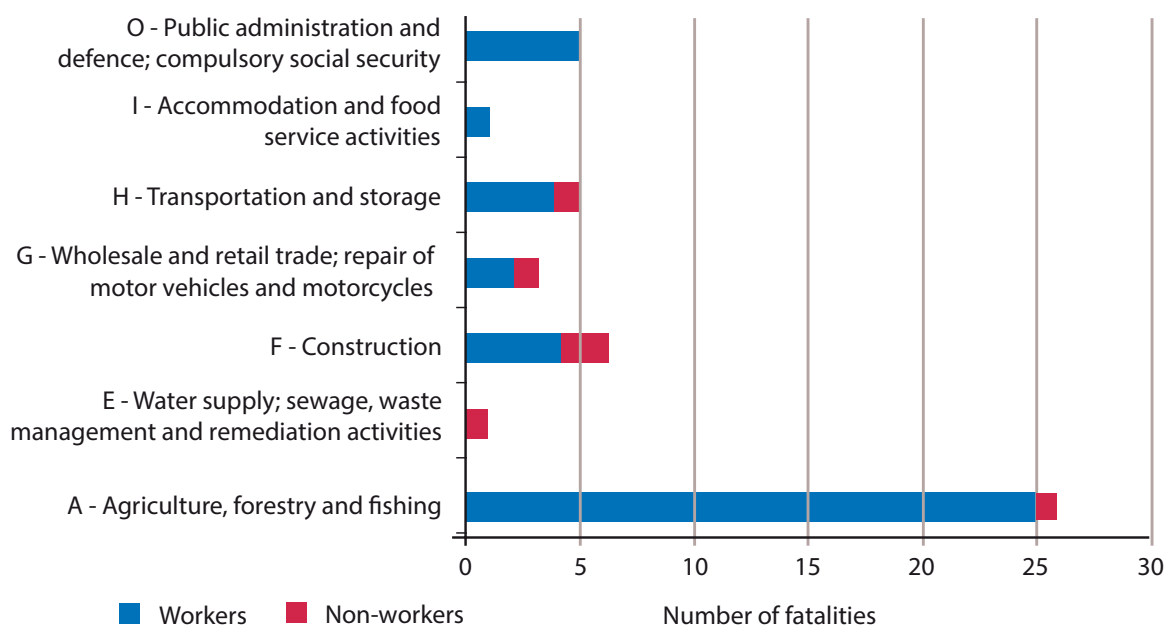


Figure 3.2: Number of reported fatalities by economic sector (worker and non-worker), 2017 (HSA)



3 Fatal injury statistics

Figure 3.3: Number of reported fatalities (worker and non-worker) by economic sector, 2010–2017 (HSA)

Economic sector	Number of fatalities								Total
	2010	2011	2012	2013	2014	2015	2016	2017	2010-2017
A–Total agriculture, forestry and fishing	29	27	28	21	31	24	25	26	211
Agriculture	22	22	20	16	30	18	20	24	172
Forestry	3	0	1	0	0	1	1	0	6
Fishing	4	5	7	5	1	5	4	2	33
B–Mining and quarrying	0	1	1	2	0	2	1	0	7
C–Manufacturing	2	2	0	1	3	3	2	0	13
D–Electricity, gas, steam and air conditioning supply	0	0	0	1	1	0	0	0	2
E–Water supply, sewerage, waste management and remediation activities	2	3	4	1	0	3	1	1	15
F–Construction	6	6	8	11	8	11	9	6	65
G–Wholesale and retail trade	4	2	3	3	4	2	2	3	23
H–Transportation and storage	3	7	1	4	4	4	1	5	29
I–Accommodation and food services	0	1	0	0	0	0	0	1	2
J–Information and communication	0	0	0	0	0	0	0	0	0
K–Financial and insurance activities	0	0	0	0	0	0	0	0	0
L–Real-estate activities	0	0	0	0	0	0	0	0	0
M–Professional, scientific and technical activities	0	2	1	1	1	0	0	0	5
N–Administrative and support-service activities	0	0	1	0	2	0	2	0	5
O–Public administration and defence	0	1	0	0	0	4	1	5	10
P–Education	0	0	0	1	0	0	0	0	1
Q–Human-health and social-work activities	1	1	1	0	0	2	1	0	6
R–U–Other NACE activities	1	1	0	1	1	1	1	0	6
Total	48	54	48	47	55	56	46¹³	47	400

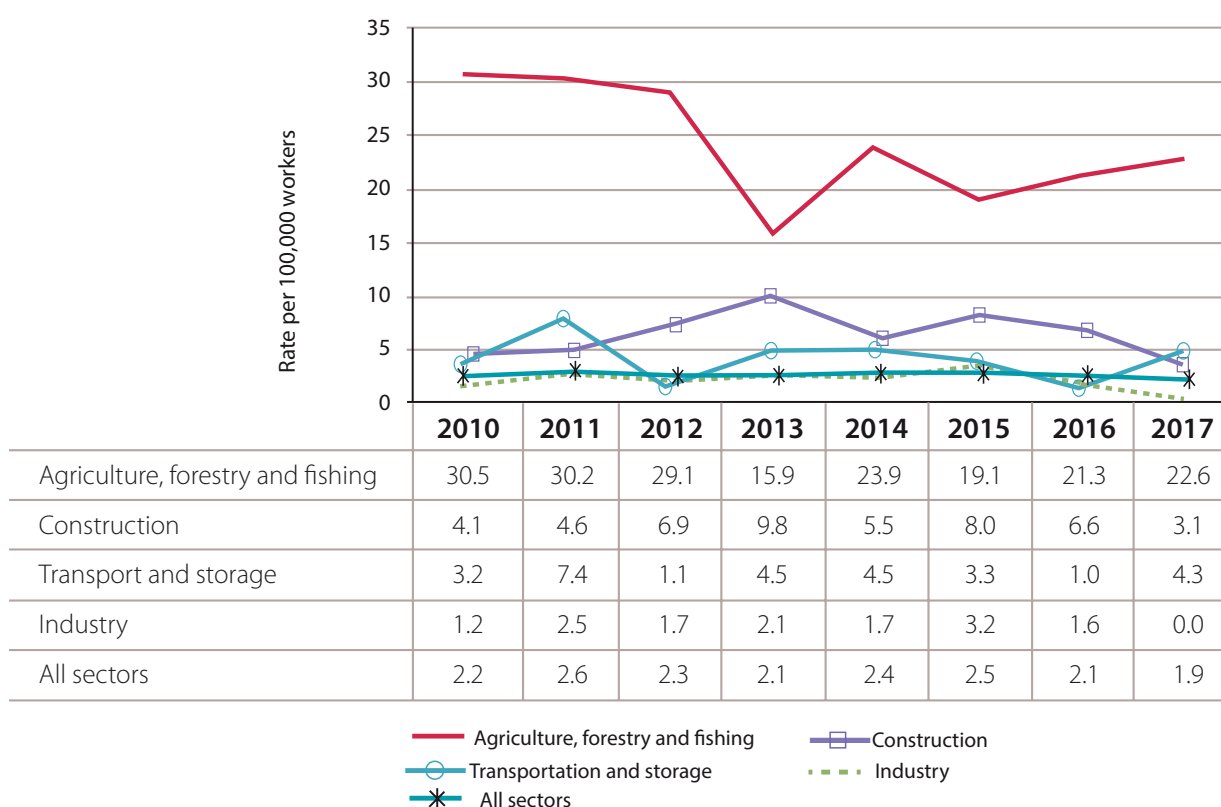
¹³ The 2015–2016 statistics report reported 45 fatal accidents in 2016. One additional fatal accident was recorded for the year 2016 following the publication of that report.

Figure 3.4: Rate of reported worker fatalities by economic sector, 2017 (HSA)

Economic sector	Worker						Non-Worker	Total
	Employee	Self-employed	Family worker	Trainee	Total	Rate per 100,000	Non-Worker	
Agriculture, forestry and fishing	3	13*	9	0	25	22.6	1	26
Industry (NACE B–E)	0	0	0	0	0	0.0	1	1
Construction	3	0	1	0	4	3.1	2	6
Wholesale and retail trade	0	2	0	0	2	0.7	1	3
Transportation and storage	2	2	0	0	4	4.3	1	5
Accommodation and food service activities	0	1	0	0	1	0.6	0	1
Public administration and defence	5	0	0	0	5	5.1	0	5
Total persons	13	18	10	0	41	1.9	6	47

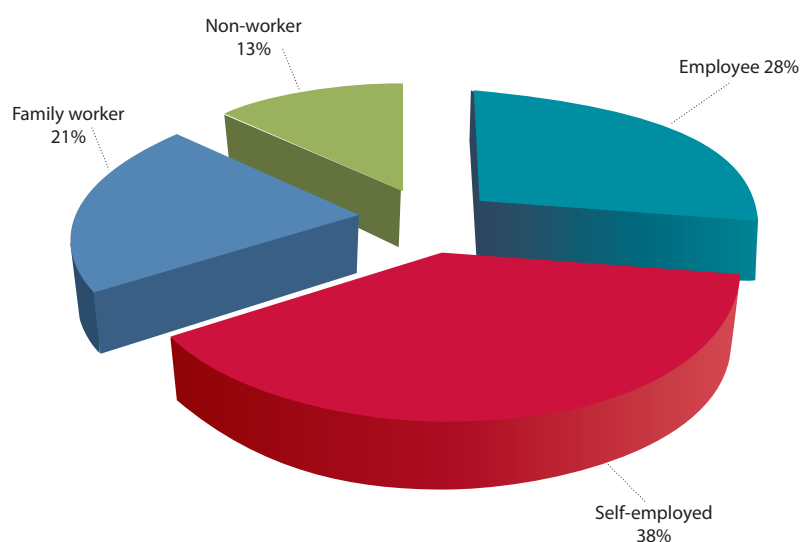
Note: * 12 in agriculture and one in fishing.

Figure 3.5: Comparison of fatality rates in selected sectors, 2010–2017 (HSA)



3 Fatal injury statistics

Figure 3.6: Percentage of reported fatal injuries by employment status, 2017 (HSA)



Note: numbers are small for some groups (n=13 for employee; n= 18 for self-employed; n=10 for family worker and n=6 for non-worker).

Figure 3.7: Number of reported fatalities (worker and non-worker) by economic sector and age band, 2017 (HSA)

	Economic Sector							
Age	A	E	F	G	H	I	O	Total
0–17 years	1	0	0	0	0	0	0	1
18–24 years	0	0	0	0	0	0	0	0
25–34 years	5	1	2	0	0	0	0	8
35–44 years	0	0	1	0	1	0	1	3
45–54 years	3	0	0	1	1	0	4	9
55–64 years	3	0	1	0	1	1	0	6
65+ years	14	0	2	2	2	0	0	20
Total	26	1	6	3	5	1	5	47

Note:

A – Agriculture, forestry and fishing; E – Water supply; sewerage, waste management and remediation activities; F – Construction; G – Wholesale/retail trade, repair of vehicles, personal and household goods; H – Transportation and storage; I – Accommodation and food service activities; O – Public administration and defence.

Figure 3.8: Number of reported fatalities (worker and non-worker) by age band, 2017 (HSA)

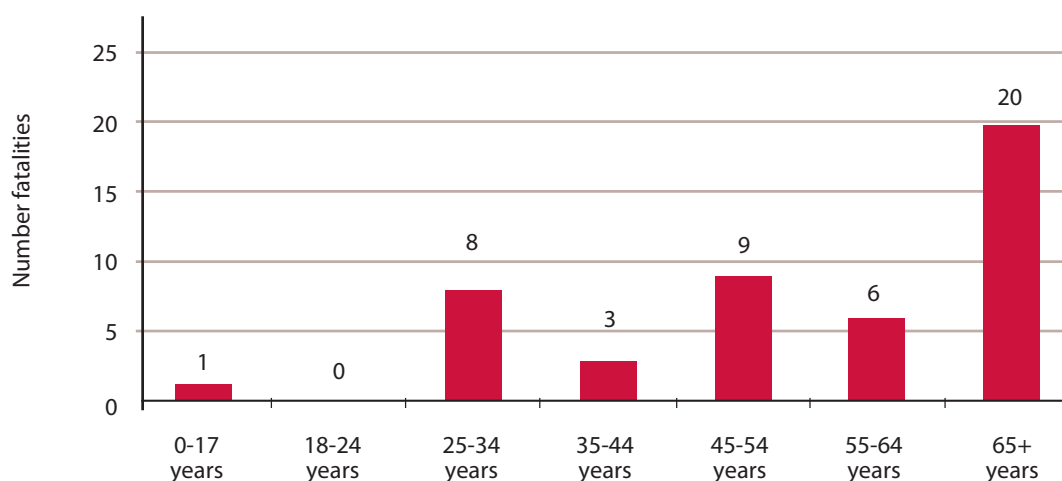
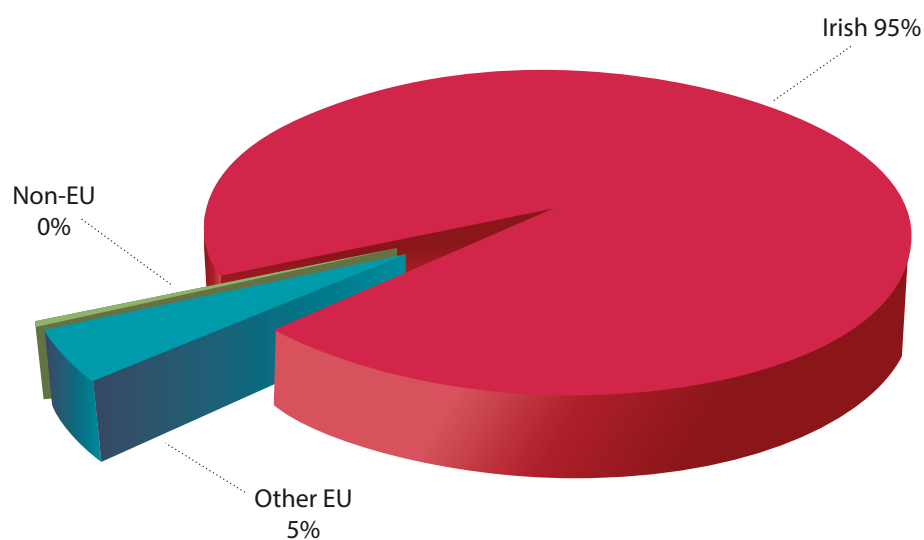


Figure 3.9: Number of reported worker fatalities by nationality and economic sector, 2017 (HSA)

Economic sector	Irish	Other EU	Non-EU
A-Agriculture, forestry and fishing	25	0	0
F-Construction	4	0	0
G-Wholesale and retail	2	0	0
H-Transportation and storage	3	1	0
I-Accommodation and food service activities	0	1	0
O-Public administration and defence	5	0	0
Total	39	2	0

3 Fatal injury statistics

Figure 3.10: Percentage of reported worker fatalities by nationality, 2017 (HSA)



Note: numbers are small for the non-Irish groups (n=2 for other EU group; n=0 for non-EU group).

Figure 3.11: Reported worker fatality rates (per 100,000 workers) by nationality, 2010–2017 (HSA)

	2010	2011	2012	2013	2014	2015	2016	2017
Irish workers	2.3	2.6	2.4	2	2.6	2.8	1.9	2.1
Non-Irish national workers	1.8	2.6	2.2	2.9	1.4	1.1	3.2	0.6
All workers	2.2	2.6	2.3	2.2	2.4	2.5	2.1	1.9

Figure 3.12: Number of fatalities (worker and non-worker) by accident trigger, 2017 (HSA)

Accident trigger	Number	Percent
Loss of control of means of transport or handling equipment	21	44.7
Fall from height	5	10.6
Person in inappropriate area	4	8.5
Loss of control of animal	4	8.5
Fall, collapse of material - on same level	3	6.4
Explosion	2	4.3
Accident trigger unknown	2	4.3
Fall on same level	1	2.1
Gas or aerosol formation	1	2.1
Fall, collapse of material - from below	1	2.1
Electrical problem - direct contact	1	2.1
Fall, collapse of material - from above	1	2.1
Loss of control of object being worked on	1	2.1
Total	47	100%

3 Fatal injury statistics

Figure 3.13: Number of reported fatalities (worker and non-worker) by region, 2010–2017 (HSA)

Region	2010	2011	2012	2013	2014	2015	2016	2017
Border	10	4	9	7	10	15	5	5
Midlands	4	4	6	4	3	1	3	4
West	5	5	6	7	6	8	4	9
Dublin	2	4	2	4	8	3	3	6
Mid-East	5	3	1	2	2	3	6	3
Mid-West	7	9	10	2	5	7	5	4
South-East	5	8	3	6	11	8	7	9
South-West	10	17	11	14	10	11	12	7
Total	48	54	48	46	55	56	45	47

Border: Cavan, Donegal, Leitrim, Louth, Monaghan, Sligo

Midlands: Laois, Longford, Offaly, Westmeath

West: Galway, Mayo, Roscommon

Dublin: Dublin

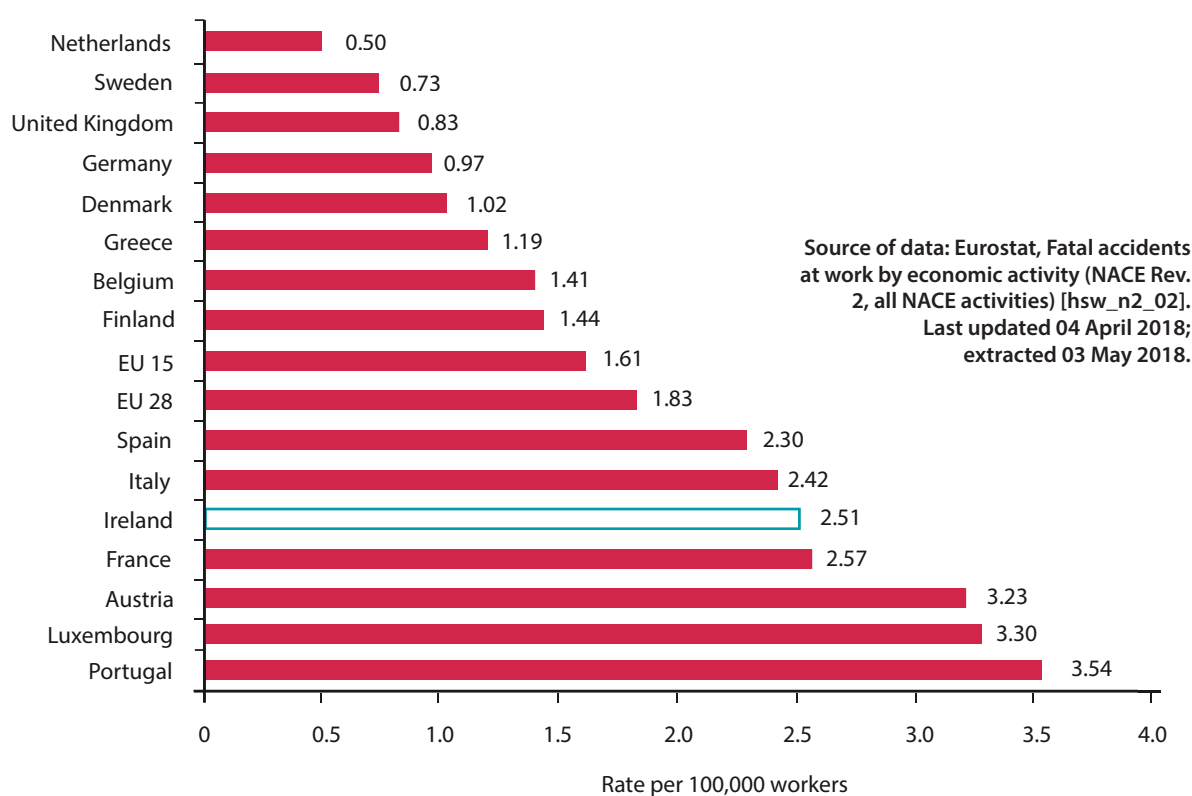
Mid-East: Kildare, Meath, Wicklow

Mid-West: Clare, Limerick, Tipperary North

South-East: Carlow, Kilkenny, Tipperary South, Waterford, Wexford

South-West: Cork, Kerry

Figure 3.14: Worker fatality rates per 100,000 workers in the EU15 Zone, 2015 (Eurostat)



A high-angle, close-up photograph of a construction worker. The worker is wearing a bright red hard hat and a high-visibility yellow safety vest over a blue long-sleeved shirt. They are wearing white work gloves with purple and grey stripes. The worker is focused on their task, leaning over a complex network of steel reinforcement bars (rebar) that are being bent and shaped. The rebar is arranged in a grid-like pattern, with some sections already bent into loops. The background shows more rebar and the rough, grey concrete of a construction site. The lighting is bright, suggesting an outdoor or well-lit indoor environment. An orange circular graphic is overlaid on the right side of the image, containing the title text.

Appendix

Classification of economic activities

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Appendix – Classification of economic activities

NACE Rev 2 – Level 1 and 2

NACE Rev 2 Code		Level	NACE Rev 2 Description
AGRICULTURE, FORESTRY AND FISHING			
A	01	2	Crop and animal production, hunting and related service activities
A	02	2	Forestry and logging
A	03	2	Fishing and aquaculture
MINING AND QUARRYING			
B	05	2	Mining of coal and lignite
B	06	2	Extraction of crude petroleum and natural gas
B	07	2	Mining of metal ores
B	08	2	Other mining and quarrying
B	09	2	Mining support-service activities
MANUFACTURING			
C	10	2	Manufacture of food products
C	11	2	Manufacture of beverages
C	12	2	Manufacture of tobacco products
C	13	2	Manufacture of textiles
C	14	2	Manufacture of wearing apparel
C	15	2	Manufacture of leather and related products
C	16	2	Manufacture of wood and of products of wood and cork, except furniture; manufacture of articles of straw and plaiting materials
C	17	2	Manufacture of paper and paper products
C	18	2	Printing and reproduction of recorded media
C	19	2	Manufacture of coke and refined petroleum products
C	20	2	Manufacture of chemicals and chemical products
C	21	2	Manufacture of basic pharmaceutical products and pharmaceutical preparations
C	22	2	Manufacture of rubber and plastic products
C	23	2	Manufacture of other non-metallic mineral products
C	24	2	Manufacture of basic metals
C	25	2	Manufacture of fabricated metal products, except machinery and equipment
C	26	2	Manufacture of computer, electronic and optical products
C	27	2	Manufacture of electrical equipment
C	28	2	Manufacture of machinery and equipment n.e.c.
C	29	2	Manufacture of motor vehicles, trailers and semi-trailers
C	30	2	Manufacture of other transport equipment
C	31	2	Manufacture of furniture
C	32	2	Other manufacturing
C	33	2	Repair and installation of machinery and equipment

NACE Rev 2 Code		Level	NACE Rev 2 Description
ELECTRICITY, GAS, STEAM AND AIR-CONDITIONING SUPPLY			
D	35	2	Electricity, gas, steam and air-conditioning supply
WATER SUPPLY: SEWERAGE, WASTE MANAGEMENT AND REMEDIATION ACTIVITIES			
E	36	2	Water collection, treatment and supply
E	37	2	Sewerage
E	38	2	Waste collection, treatment and disposal activities; materials recovery
E	39	2	Remediation activities and other waste management services
CONSTRUCTION			
F	41	2	Construction of buildings
F	42	2	Civil engineering
F	43	2	Specialised construction activities
WHOLESALE AND RETAIL TRADE: REPAIR OF MOTOR VEHICLES AND MOTORCYCLES			
G	45	2	Wholesale and retail trade and repair of motor vehicles and motorcycles
G	46	2	Wholesale trade, except of motor vehicles and motorcycles
G	47	2	Retail trade, except of motor vehicles and motorcycles
TRANSPORTATION AND STORAGE			
H	49	2	Land transport and transport via pipelines
H	50	2	Water transport
H	51	2	Air transport
H	52	2	Warehousing and support activities for transportation
H	53	2	Postal and courier activities
ACCOMMODATION AND FOOD SERVICE ACTIVITIES			
I	55	2	Accommodation
I	56	2	Food and beverage service activities
INFORMATION AND COMMUNICATION			
J	58	2	Publishing activities
J	59	2	Motion picture, video and television programme production, sound recording and music publishing activities
J	60	2	Programming and broadcasting activities
J	61	2	Telecommunications
J	62	2	Computer programming, consultancy and related activities
J	63	2	Information service activities

Appendix – Classification of economic activities

NACE Rev 2 – Level 1 and 2

NACE Rev 2 Code		Level	NACE Rev 2 Description
FINANCIAL AND INSURANCE ACTIVITIES			
K	64	2	Financial service activities, except insurance and pension funding
K	65	2	Insurance, reinsurance and pension funding, except compulsory social security
K	66	2	Activities auxiliary to financial services and insurance activities
REAL-ESTATE ACTIVITIES			
L	68	2	Real-estate activities
PROFESSIONAL, SCIENTIFIC AND TECHNICAL ACTIVITIES			
M	69	2	Legal and accounting activities
M	70	2	Activities of head offices; management consultancy activities
M	71	2	Architectural and engineering activities; technical testing and analysis
M	72	2	Scientific research and development
M	73	2	Advertising and market research
M	74	2	Other professional, scientific and technical activities
M	75	2	Veterinary activities
ADMINISTRATIVE AND SUPPORT-SERVICE ACTIVITIES			
N	77	2	Rental and leasing activities
N	78	2	Employment activities
N	79	2	Travel agency, tour operator and other reservation service and related activities
N	80	2	Security and investigation activities
N	81	2	Services to buildings and landscape activities
N	82	2	Office administrative, office support and other business support activities
PUBLIC ADMINISTRATION AND DEFENCE; COMPULSORY SOCIAL SECURITY			
O	84	2	Public administration and defence; compulsory social security
EDUCATION			
P	85	2	Education
HEALTH AND SOCIAL WORK ACTIVITIES			
Q	86	2	Human health activities
Q	87	2	Residential care activities
Q	88	2	Social-work activities without accommodation

NACE Rev 2 Code		Level	NACE Rev 2 Description
ARTS, ENTERTAINMENT AND RECREATION			
R	90	2	Creative, arts and entertainment activities
R	91	2	Libraries, archives, museums and other cultural activities
R	92	2	Gambling and betting activities
R	93	2	Sports activities and amusement and recreation activities
OTHER SERVICE ACTIVITIES			
S	94	2	Activities of membership organisations
S	95	2	Repair of computers and personal and household goods
S	96	2	Other personal service activities
ACTIVITIES OF HOUSEHOLDS AS EMPLOYERS; UNDIFFERENTIATED GOODS AND SERVICES – PRODUCING ACTIVITIES OF HOUSEHOLDS FOR OWN USE			
T	97	2	Activities of households as employers of domestic personnel
T	98	2	Undifferentiated goods and services – producing activities of private households for own use
ACTIVITIES OF EXTRATERRITORIAL ORGANISATIONS AND BODIES			
U	99	2	Activities of extraterritorial organisations and bodies

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Notes

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