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Statistical review of occupational injuries

IRELAND

2004-2010 data



Set of statistical data relating to **accidents at work**
and **occupational diseases** in the European Union
Member States

Foreword

This document sets out a descriptive synthesis of the main available statistical data about accidents at work, commuting accidents and occupational diseases of the considered EU Member State.

It comes from the use by EUROGIP of various official publications from Member States. The data have been translated and presented according to the EUROGIP's knowledge of the analysed insurance system. These data have not been reprocessed by EUROGIP. For any confirmation, one has to refer to the source which is systematically given.

Comments do not intend to give explanatory factors to the figures but only to describe the underlying system's characteristics in order to allow the reader to analyse them.

Furthermore, Eurostat (Statistical Office of the European Communities) publishes, at European level, harmonised accidents at work data according to the ESAW (European Statistics on Accidents at Work) methodology in implementation of the 89/391/EEC directive. In order to complete national data, the last part of this document shows accidents at work structural indicators computed and published by Eurostat.

Acknowledgements

EUROGIP is grateful for the contribution of Mr Hugh Jordan from the Health and Safety Authority to this statistical review.

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1. Main characteristics of the Irish occupational injury insurance system

Main principles

The first law setting the mandatory compensation of workers' injuries (Workmen's Compensation Act) was enacted in 1897. The main current legislation (Safety, Health and Welfare at Work Act) was put in place in 2005. This Act consolidates and updates the provisions of the Safety, Health and Welfare Act 1989. It applies to all employers, employees (fixed term and temporary employees) and self-employed people in their workplaces. The Act sets out the rights and obligations of both employers and employees and provides for substantial fines and penalties for breaches of the health and safety legislation. Then on 1st November 2007, came into effect the Safety, Health and Welfare at Work (General Application) Regulations 2007 which contain almost all of the specific health and safety laws which apply generally to all employers.

Safety and health at work is under the responsibility (enforcement, monitoring, information and advices) of the HSA, Health and Safety Authority. As for the social insurances' benefits, they are paid by the Social Welfare Services of the Department of Social Protection. The HSE, Health Service Executive, manages the health services in charge of providing the medical treatment. The global social insurance covers all employees and self-employed from 16 to 66 year (retirement age).

Coverage of the occupational injury insurance

Accidents at work and occupational diseases are covered by the insurance. A commuting accident while on an unbroken journey to or from work is considered as an accident at work and taken in charge by the insurance. There are no specific commuting accidents data.

The social insurance against occupational risks is mandatory. Whatever their age, all employees from the private and public

sectors (but some civil servant doctors and dentists and policemen) and some trainees are covered. Self-employed, family workers and armed forces members are exempted from the mandatory insurance. There is no voluntary insurance scheme against occupational injuries. Otherwise, employees earning less than 38 € per week and those older than 66 years of age remain covered by the social insurance but only for the occupational injuries benefits.

Funding system

The funding of the occupational risks insurance is the responsibility of both employees and employers. Occupational risks insurance's contributions are integrated into the global contribution which finances the social protection scheme. Employees' contribution is calculated starting on a threshold but employers' contributions are based on the whole salary¹. The calculation timeframe of the contribution, wages and benefits is the week.

The government covers the deficit eventually incurred to the insurance scheme because of insurance expenses paid to private sector's employees. He also covers the total cost of the public sector insurance.

HSE benefits in kind are funded by the taxes.

Reporting and notification of occupational injuries

As soon as an occupational injury generates a work stoppage for more than 3 consecutive days, not including the day of the accident, for an employee or a self-employed, it has to be reported to the HSA. Accidents related to a place of work

¹ Employees with a weekly salary equal or inferior to 352 € do not pay any contribution. Above this threshold, a 4 % contribution rate is applied to the wages' part above the first weekly 127 €. Employer's rate is of 4.25 % for weekly wages equal or inferior to 356 € and of 10.75 % beyond this threshold. Rates applied in July 2011.

or a work activity where a non-worker requires treatment from a medical practitioner are also reportable.

The employer, the person in charge or the self-employed have to notify the injury as soon as possible by phone, fax or electronic means. Occupational accidents notification forms include the ESAW variables (European Statistics on Accidents at Work).

When happens a dangerous occurrence (near miss) of the kind listed in the twelfth schedule, General Application Regulations (S.I. No. 44 of 1993) which is not reportable because no death or injury occurs, it has nevertheless to be notified in writing as soon as practicable by the employer/self-employed using a specific form to the Health and Safety Authority.

On the other hand, in order to protect his/her rights in case of after-effects, the employee may request his/her accident or disease to be notified even when there is no day off work. A specific form is available for this kind of notification.

The HSA noticed the existence of some under-reporting. Indeed, the CSO, Central Statistics Office, publishes data about the number of compensations granted and the amounts paid (see chapter 6). As the HSA compares its own data with those of the CSO, it concluded that there is some under-registration of non-fatal accidents in specific activity sectors.

Occupational diseases

There is a list of 56 occupational diseases. To each one of these diseases a specific type of activity is associated. The law says the disease has to develop during work because of the type of working activity for instance because of the exposure to chemical or biological agents in the course of work. The recognition is granted as soon as the victim suffers of one of the listed diseases and practices the activity associated to the disease. Generally there is no minimum exposure length of time to risks but for a few cases (for instance 10 years for deafness). For the diseases not listed the victim has to prove that his/her disease has developed due to his/her employment.

The victim may claim right away for a permanent disability in case of byssinosis, pneumoconiosis, deafness and asthma.

The occupational diseases list is available from the following web address:
<http://www.welfare.ie/EN/OperationalGuidelines/Documents/prescribeddiseases.pdf>

EUROGIP did not identify published statistical data about occupational diseases' claims for recognition and recognitions. It is worth noting the introduction, between 2005 and 2007, of the British network system THOR² (The Health and Occupational Reporting network) of monitoring and forwarding of information from voluntarily participating doctors. THOR includes the modules OPRA (Occupational Physicians Reporting Activity), EPIDERM (work-related skin diseases) and SWORD (respiratory diseases).

Main compensation principles

There is no minimum qualifying period to draw insurance benefits.

1) Coverage of the victim

Entitlement to benefits is identical, such as the claim forms, for accidents at work and occupational diseases. To be entitled to occupational injuries benefits the victim must be away from work for at least three days.

The victim must claim compensation within 21 days after the occurrence of the accident or of the disease. The victim sends his/her claim to the Department of Social Protection which manages the compensation claims. The claim must include an initial inaptitude to work certificate. This form is at the same time a doctor certificate and a compensation claim. It is available from the doctor's office. In addition, a medical certificate must be provided each week to the Department of Social Protection during the whole length of the work stoppage. The victim may challenge the Department of Social Protection's decision. Each year, the Department receives from 200 to 300 claims for occupational diseases recognition of which less than 5 % would be recognized³.

² <http://www.rcpi.ie/news/pages/thehealthoccupationalreportingnetworkintherepublicofireland.aspx>

³ A review of the Occupational Diseases Reporting System in the Republic of Ireland – page 50

2) Benefits in kind

Benefits in kind are provided without limitation in time.

Medical costs are taken in charge by the HSE and/or the Treatment Benefit Scheme which is specialized in providing medical equipment, dental and ophthalmological services.

In addition, the occupational risks insurance may take in charge additional expenses (medical examinations, home nursing, dental care...) not covered by the two above mentioned schemes. These expenses must be "reasonable and necessary". Practically, the insurance refunds the victim or the health professional. The victim has to inform the insurance of his/her willingness to claim for a refund within six weeks after the accident or the initial occupational disease diagnosis.

3) Benefits in cash

Temporary disability benefits are paid after a three-day waiting period for a duration of 26 weeks starting on the date of the accident or the date the disease appeared. Beyond these 26 weeks, either the victim gets other forms of temporary disability benefits (illness) or he/she beneficiaries from permanent incapacity benefits in case of physical or psychological after-effects.

Permanent disability

Permanent disability benefits are paid in case of a partial or total loss of working capacity due to physical or psychological reasons. Benefits are paid starting from a 1 % loss of working capacity⁴.

If the disability rate is less than 20 %, benefits may be paid as a lump sum whose amount is subject to a ceiling (15,320 € in 2011). Above a 20 % disability rate, a pension is paid weekly or every month. The pension is granted for life and is not transferable. It is worth noting that the pension may be granted on a temporary basis while waiting for a later decision.

The disability benefit may be complemented by an *Incapacity*

⁴ Please refer to the document: S.I. N°. 102/2007 – Social Welfare (Consolidated Occupational Injuries) Regulations 2007
<http://www.irishstatutebook.ie/2007/en/si/0102.html>

Supplement if the victim is entitled to any other benefits. Its amount is of 188 € for people less than 66 years-old and of 204.30 € above this age. The benefit's amount may be increased if the victim has dependants.

Examples of compensation for a permanent disability

Disability rate	Weekly benefits (2012 rates)
100 % and more	219 €
90 %	197.10 €
80 %	175.20 €
70 %	153.30 €
60 %	131.40 €
50 %	109.50 €
40 %	87.60 €
30 %	65.70 €
20 %	43.80 €

Benefits in cash are adjusted once a year. They are taxable⁵ but exempted of social contributions.

Examples of disability rates

Injury type	Disability rate
Loss of both hands	100 %
Loss of one eye	40 %
Loss of one thumb	30 %
Loss of two fingers of a same hand	20 %
Loss of one forefinger	14 %

The incapacity rate is set during the medical examination of the victim by a doctor of the Department of Social Protection. The victim may appeal in case his/her disability is not recognized or in case of disagreement with the granted disability rate.

Employers' liability cases

The victim may not seek liability compensation from his/her employer under the Health and Safety at Work legislation but may make a personal injury claim through the Injuries Board.

This Board is an independent body empowered to evaluate every private injury claims for compensation (automobile accidents, occupational accidents...) but cases related to a medical error. All claims involving workplace accidents (employer

⁵ Social benefits are taxable after six weeks of payment with the exception of the complement per dependent child paid in addition of the temporary incapacity benefit.

liability cases) must be submitted to the Injuries Board before starting legal proceedings.

The Board decides the compensation amount that both parties may accept or refuse. Injuries Board's settlements are faster and less expensive than a court appeal. If either the victim or the employer

refuses the settlement, the Board will issue the victim with an authorisation allowing him/her to make a claim through the civil courts.

Please refer to:

<http://www.injuriesboard.ie/eng/>

2. Statistical data sources

For **Ireland**

Occupational injuries statistics are available on the HSA web site:

<http://www.hsa.ie/eng/>

The CSO, Central Statistics Office Ireland, issues statistics notably those of the ad hoc module Accidents and Illnesses which is part of the QNHS, Quarterly National Household Survey:

<http://www.cso.ie/>

Occupational injuries compensation data are available in section E of the document *Statistical Information on Social Welfare Services 2009* published by the Department of Social Protection: www.welfare.ie

Access gate to official statistics: <http://www.statcentral.ie/>

For **Eurostat**

Structural indicators on health and safety at work in Europe are available only for fatal accidents at work and accidents at work with more than three days away from work. Data are available under various formats: tables, maps and graphs, at the following web address:

http://epp.eurostat.ec.europa.eu/portal/page/portal/health/health_safety_work

The ESAW (European Statistics on Accidents at Work) aiming to provide harmonised data about accidents at work with more than three days away from work is available at the following web address:

http://circa.europa.eu/Public/irc/dsis/hasaw/library?l=/statistics_methodology/esaw_methodology/ke4202569_en_pdf/EN_1.0_&a=d

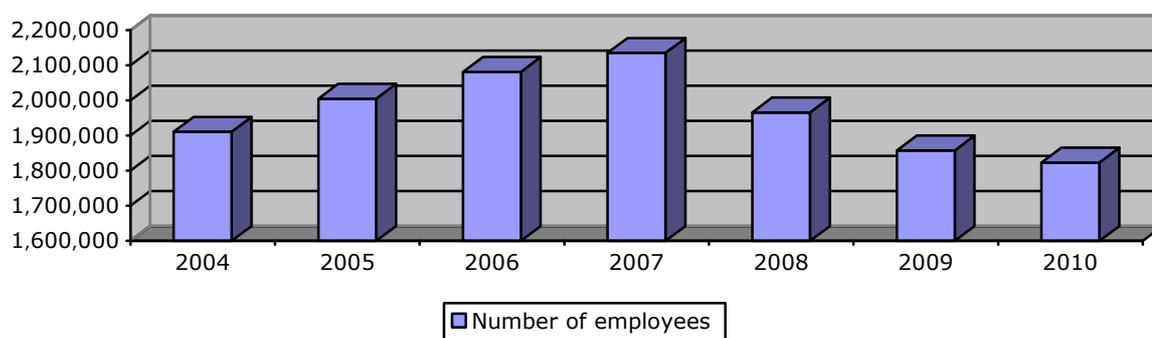
3. Main data

3.1 Number of employees

Year	Number of employees
2004	1,911,081
2005	2,004,797
2006	2,081,343
2007	2,135,112
2008	1,965,700
2009	1,857,700
2010	1,823,300

Source: Central Statistics Office – March 2011

3.2 Trend of the number of employed persons



Source: Central Statistics Office – March 2011

3.3 Distribution of employees per activity branch

NACE ⁽¹⁾	2010
A : Agriculture, forestry and fishing	85,000
B – E : Industry	238,500
F : Construction	109,900
G : Wholesale and retail trade; repair of motor vehicles and motorcycles	267,400
H : Transportation and storage	95,800
I : Accommodation and food storage activities	112,800
J : Information and communication	68,900
K – L : Financial, insurance and real estate activities	97,600
M : Professional, scientific and technical activities	98,200
N : Administrative and support service activities	58,800
O : Public administration and defence; compulsory social security	104,300
P : Education	152,400
Q : Human health and social work activities	234,300
R – U : Other NACE activities	99,400
Total	1,823,300

(1) Statistical Classification of Economic Activities in the European Union

Source: Central Statistics Office – March 2011

4. Accidents at work recorded by the HSA

4.1 Non-fatal accidents at work

Non-fatal accidents at work with more than three days away from work notified to the HSA

2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
9,215	8,098	7,172	8,412	8,330	8,441	8,754	8,417	7,161	7,284

Source: HSA

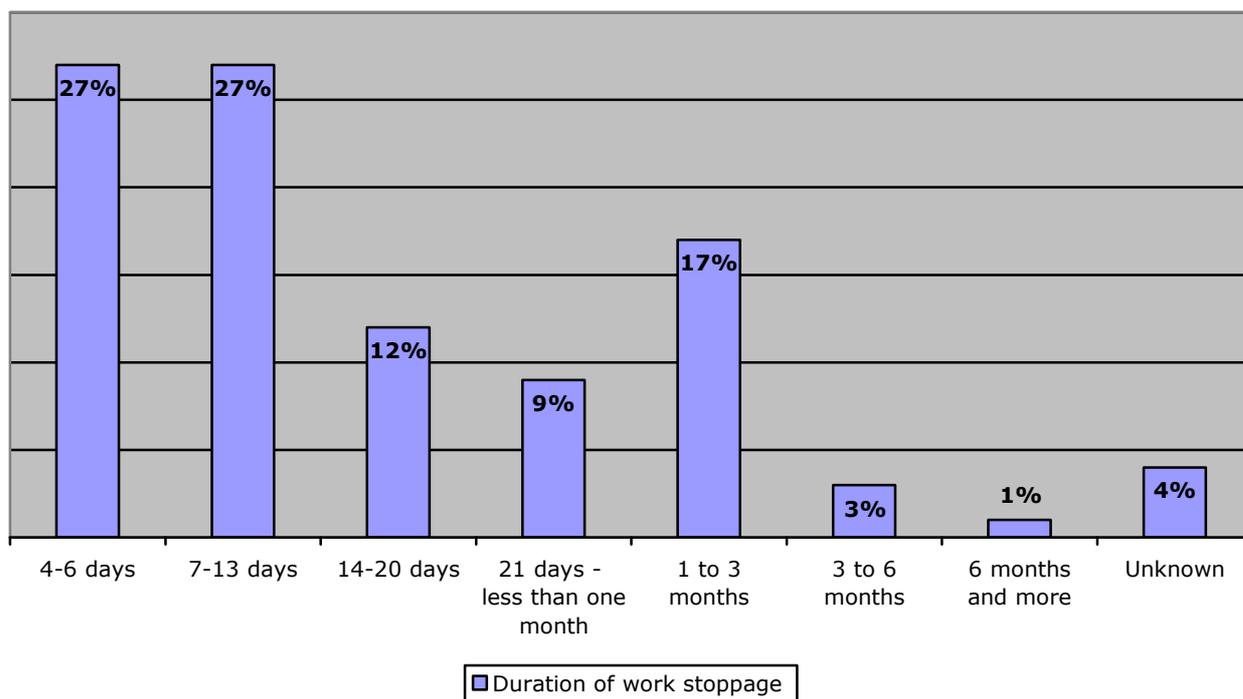
Distribution of the number of accidents at work per activity branch

NACE ⁽¹⁾	Number	%
Human health and social work activities	1,384	19.0
Manufacturing	1,262	17.3
Public administration and defence; compulsory social security	1,030	14.1
Transportation and storage	1,028	14.1
Wholesale and retail trade; repair of vehicles and motorcycles	614	8.4
Construction	571	7.8
Other service activities	210	2.9
Administrative and support services activities	184	2.5
Accommodation and food service activities	175	2.4
Education	160	2.2
Financial and insurance activities	147	2.0
Information and communication	129	1.8
Water supply; sewage, waste management and remediation activities	122	1.7
Agriculture, forestry and fishing	86	1.2
Mining and quarrying	54	0.7
Professional, scientific and technical activities	54	0.7
Arts, entertainment and recreation	46	0.6
Electricity, gas, steam and air conditioning supply	14	0.2
Real estate activities	14	0.2
Total	7,284	100.0

Source: HSA

(1) Statistical Classification of Economic Activities in the European Union

Distribution of the non-fatal accidents notified to the HSA according to the number of days away from work



Source: HSA

4.2 Fatal accidents at work

In analysing fatal accidents, one has to take into account that some fatal work-related road accidents may not have been notified to the HSA although they have been notified to the police authority. They do not appear in the following tables. According to an estimation made in 2010, the number of deaths due to a work-related road accident was close to 75⁶. However, fatal accidents occurring to non-workers (members of the public for instance) within the working premises have to be notified to the HSA.

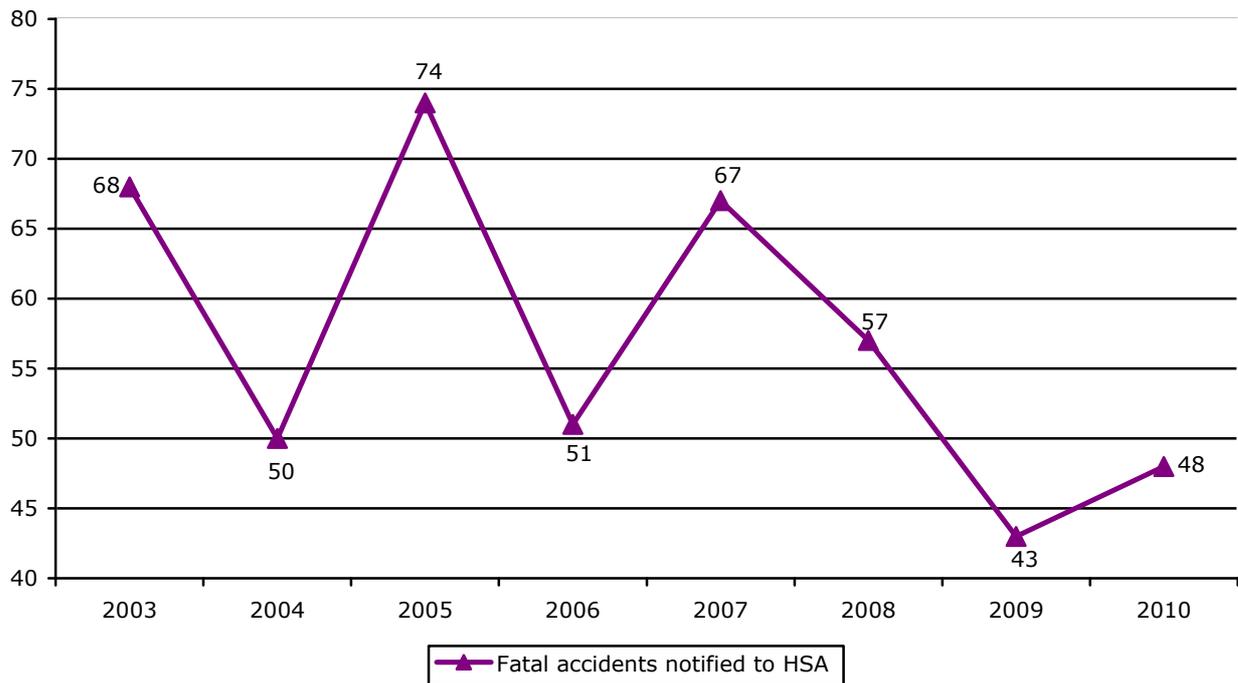
Distribution of the number of fatal accidents notified to the HSA

Year	Non-workers	Workers	Total
2005	9	64	73
2006	6	44	50
2007	8	59	67
2008	6	51	57
2009	6	37	43
2010	6	42	48

Source: HSA

⁶ <http://www.rsa.ie/Utility/News/2010/Up-To-75-Die-Each-Year-in-Work-Related-Crashes1/>

Trend of the number of fatal accidents at work notified to the HSA



This chart includes the non-workers fatal accidents.

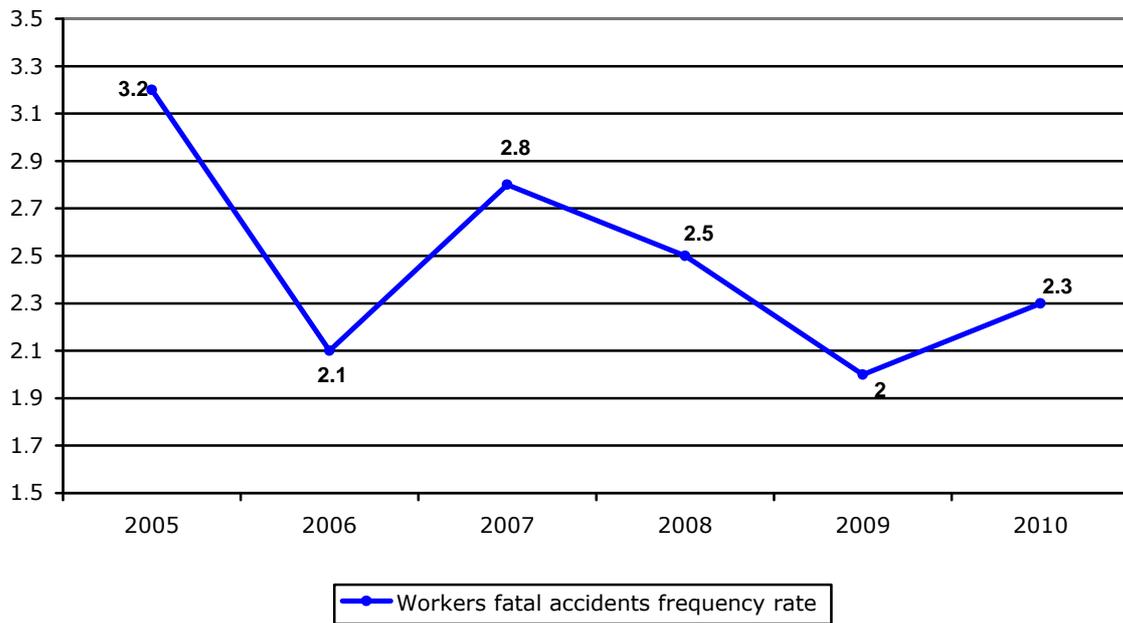
Source: HSA

Detail of the fatal accidents notified to HSA – 2010 data

Activity branch	Employee	Self-employed	Family workers of more than 15 years	Total fatal accidents	Frequency rate per 100,000	Non-workers	Total notified to HSA
A. Agriculture, forestry and fishing	4	21	1	26	30.6	3	29
B-E. Industry	3	0	0	3	1.3	1	4
F. Construction	4	0	1	5	4.5	1	6
G. Wholesale and retail trade ; repair of motor vehicles and motorcycles	2	1	0	3	1.1	1	4
H. Transportation and storage	3	0	0	3	3.1	0	3
Q. Human health and social work activities	1	0	0	1	0.4	0	1
R-U. Other NACE activities	1	0	0	1	1	0	1
Total of accidents	18	22	2	42	2.3	6	48

Source: HSA

Workers fatal accidents at work frequency rate's trend (per 100,000)



Source: HSA

5. CSO's occupational injuries estimates

Precision on the methodology

Data presented within the following tables are estimations computed by the CSO (Central Statistics Office) by using the results of a Labour Force Survey.

This estimation is computed from a sample of the voluntary information provided by employees who consider their state of health was affected or made worse because of an accident at work or an occupational disease. Data are gathered through the ad hoc module Accidents and Illnesses inserted in the QNHS (Quarterly National Household Survey) conducted during the first quarter of each year which is a Labour Force Survey.

Nevertheless, the CSA warned about the small size of the number of respondents to the survey so as to possible errors during the make-up of the sample.

Estimates of the number of lost working days

	2005	2006	2007	2008	2009
Accidents at work	723,500	765,000	1,013,700	685,500	283,200
Occupational diseases	827,600	980,200	930,300	751,600	463,700
Total	1,551,100	1,745,200	1,944,000	1,437,100	746,900

Source: CSO - Quarterly National Household Survey - QNHS

5.1 Occupational accidents

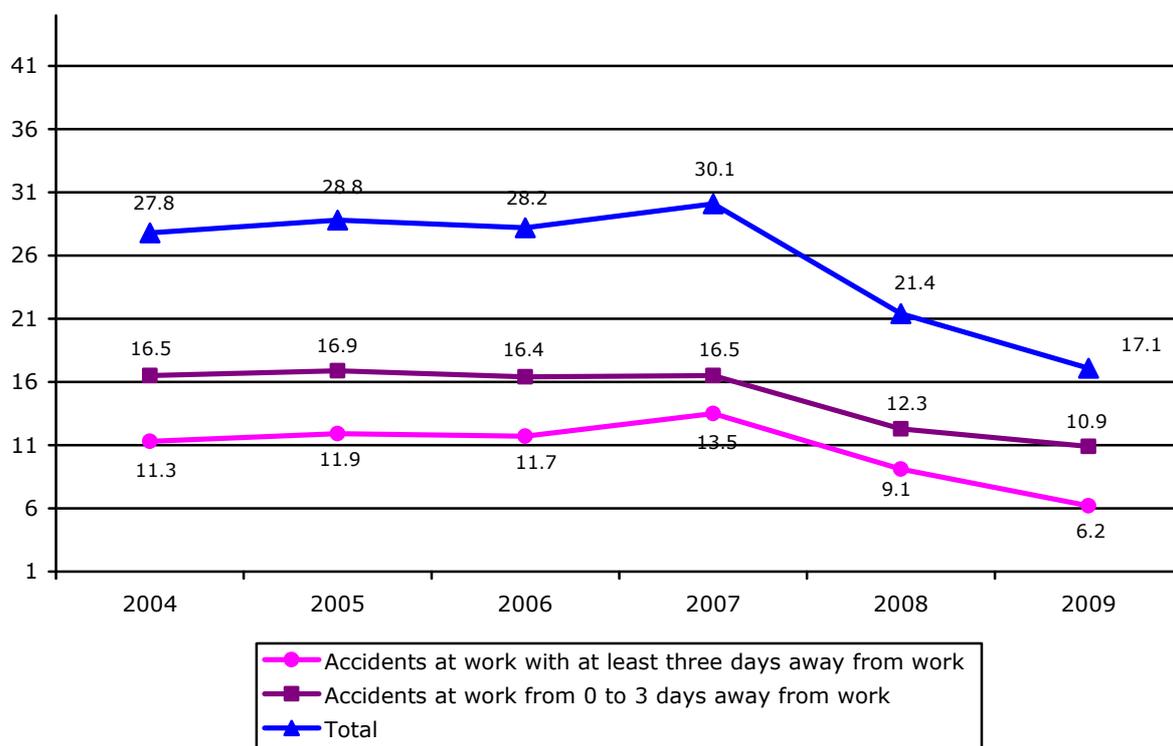
Trend of the estimated number of persons having had an accident at work

Year	from 0 to 3 days	+ than 3 days	Total
2004	31,528	21,656	53,183
2005	33,925	23,840	57,765
2006	34,197	24,392	58,615
2007	35,327	28,792	64,200
2008	24,100	17,900	42,000
2009	20,321	11,454	31,774

2010 data were not available when this review was drafted.

Source: CSO - Quarterly National Household Survey - QNHS

Frequency rate (per 1,000 persons) of the estimated number of persons who had an accident at work



Source: CSO - Quarterly National Household Survey - QNHS

Injury type per gender – 2009 data

Injury type	Men	Women	Total
Wound or superficial injury	8,648	2,495	11,143
Bone fracture	1,135	1,174	2,308
Dislocation, sprain or strain	5,788	2,472	8,260
Amputation, concussion, internal injury, burns, scald or frost bite	1,742	1,273	3,015
Other type of injury or not stated	4,228	2,819	7,047
Total	21,541	10,233	31,774

Source: CSO Quarterly National Household Survey - QNHS

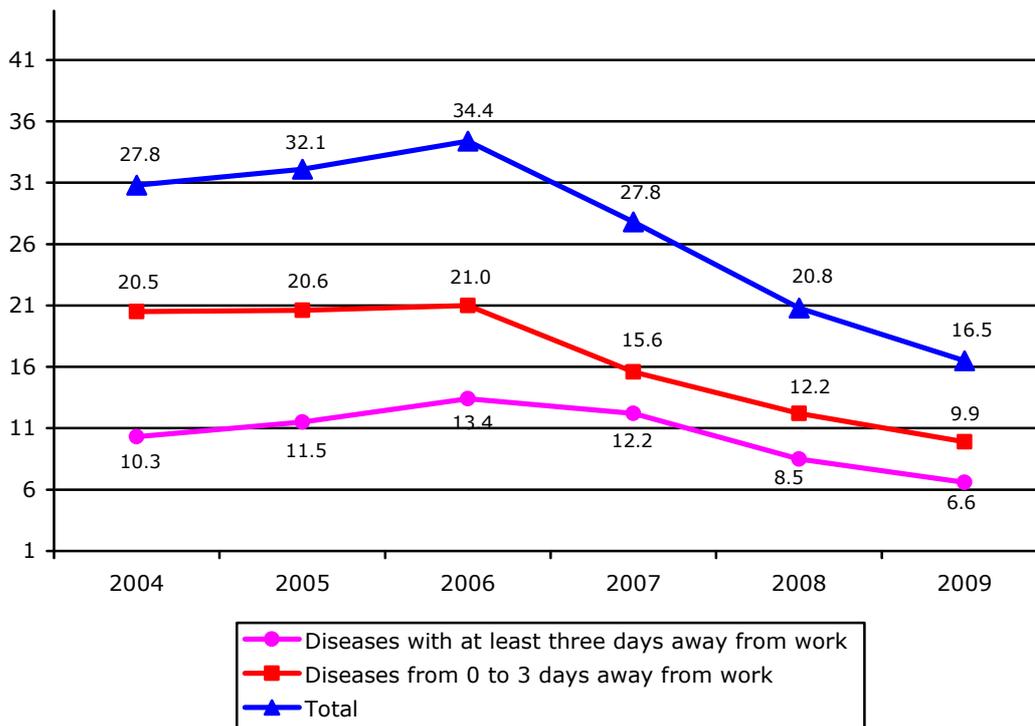
5.2 Occupational diseases

Trend of the estimated number of persons having suffered from a disease linked to work

Year	from 0 to 3 days	+ than 3 days	Total
2003	29,500	18,500	48,000
2004	39,230	19,694	58,924
2005	41,382	23,048	64,430
2006	43,653	27,952	71,675
2007	33,319	25,954	59,273
2008	24,000	16,800	40,900
2009	18,329	12,265	30,593

Source: CSO - Quarterly National Household Survey - QNHS

Trend expressed in frequency rate (per 1,000 persons) of the estimated number of persons having suffered from a disease linked to work



Source: CSO - Quarterly National Household Survey - QNHS

Disease type per gender – 2009 data

Disease type	Men	Women	Total
Bone, joint or muscle problem	8,074	5,025	13,099
Breathing or lung problem	1,797	643	2,439
Hearing problem, headache or eyestrain, heart disease or attack, circulatory problem, disease (virus, bacteria, cancer or other type of disease)	1,782	1,636	3,418
Stress, depression, anxiety	2,426	3,019	5,445
Other type of illness or not stated	3,496	2,695	6,191
Total	17,574	13,018	30,593

Source: CSO Quarterly National Household Survey - QNHS

6. Financial data

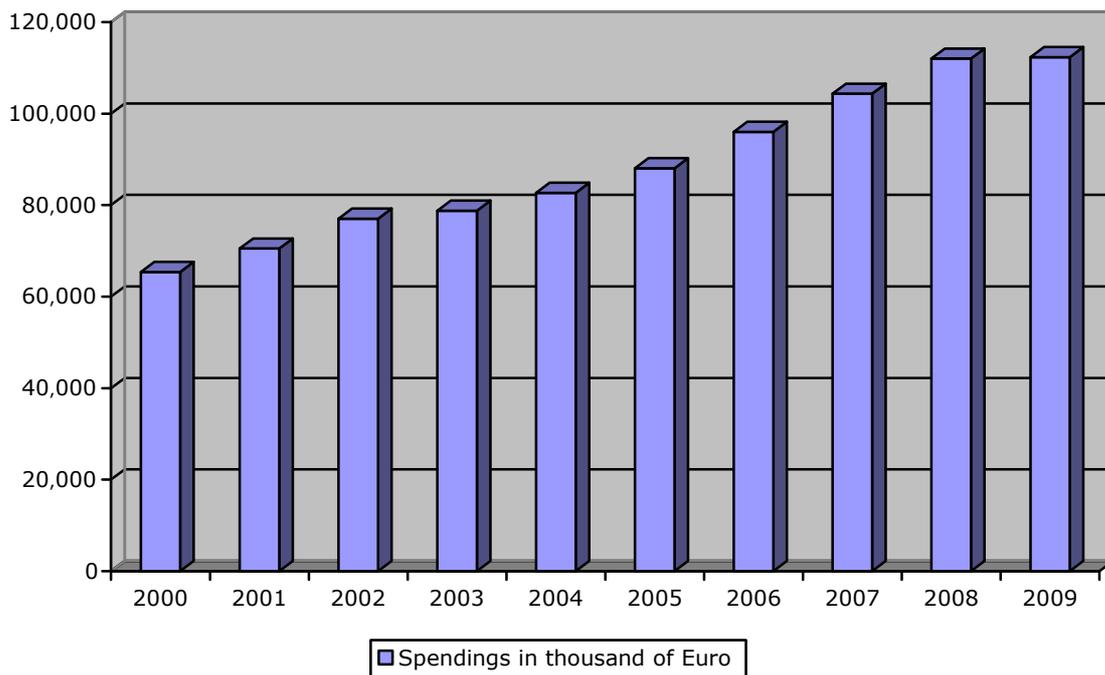
Expenses incurred by the occupational risks insurance

Type of payment	2008	2009 (provisory)
Injury benefit	19,250	20,974
Disability benefit	84,443	85,652
Death benefit	8,036	5,374
Medical care	282	309
Total	112,011	112,309

In thousands of Euro

Source: Statistical Information on Social Welfare Services 2009

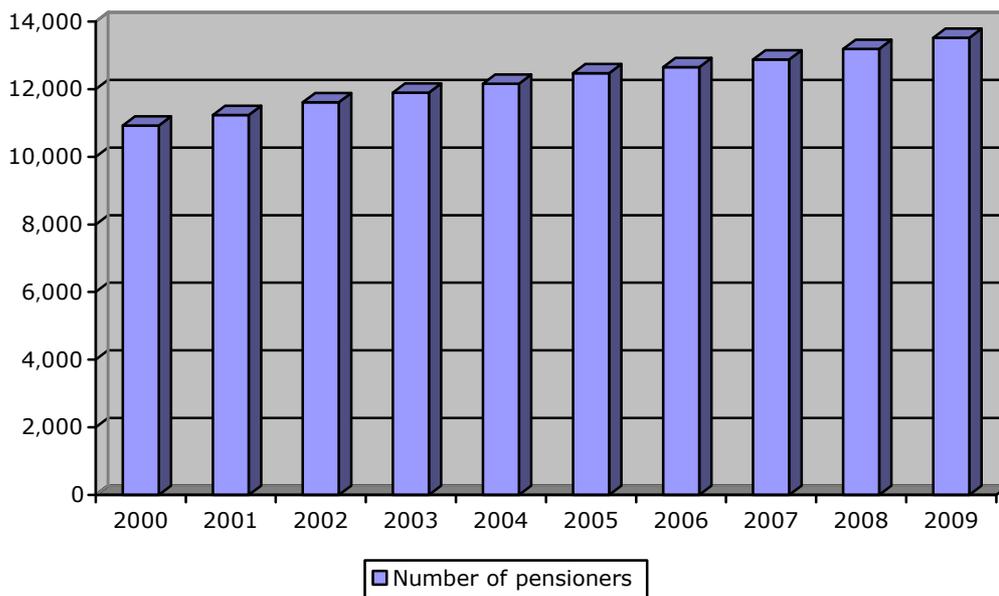
Trend of occupational injuries insurance's expenses



2009 data are provisory

Source: Statistical Information on Social Welfare Services 2009

Trend of the number of pensioners



Source: Statistical Information on Social Welfare Services 2009

Distribution of the stock of pensioners per age band and gender- 2009 data

Age	Men	Women	Total
Under 25 years	76	13	89
from 25 to 29 years	203	53	256
from 30 to 34 years	391	131	522
from 35 to 39 years	671	260	931
from 40 to 44 years	947	338	1,285
from 45 to 49 years	1,255	409	1,664
from 50 to 54 years	1,498	426	1,924
from 55 to 59 years	1,553	406	1,959
from 60 to 64 years	1,533	361	1,894
from 65 to 69 years	1,128	204	1,332
from 70 to 74 years	722	101	823
from 75 to 79 years	438	60	498
80 years and over	285	58	343
Total	10,700	2,820	13,520

Source: Statistical Information on Social Welfare Services 2009

Distribution of the stock of pensioners per gender and incapacity rate - 2009 data

Rate	Men	Women	Total
Under 20 %	1,628	531	2,159
20 %	2,340	843	3,183
30 %	2,951	776	3,727
40 %	1,686	366	2,052
50 %	810	130	940
60 %	513	80	593
70 %	264	31	295
80 %	209	33	242
90 %	65	7	72
100 %	234	23	257
Total	10,700	2,820	13,520

Source: Statistical Information on Social Welfare Services 2009

7. Eurostat data

Structural indicators are available only for accidents at work. 2007 data are not available.

Index of the number of serious accidents at work per 100,000 persons in employment (1998 = 100) (*)

Serious accidents – Total	1998	1999	2000	2001	2002	2003	2004	2005	2006
EU (27 countries)	:	:	100	96	88	84	80	78	76
EU (25 countries)	100	100	99	95	87	82	79	77	75
EU (15 countries)	100	100	98	94	86	81	78	76	74
Ireland	100	:	:	:	100	105	94	101	107

(:) Not available

Index of the number of fatal accidents at work per 100,000 persons in employment (1998 = 100) (*)

Fatal accidents	1998	1999	2000	2001	2002	2003	2004	2005	2006
EU (27 countries)	:	:	100	97	91	90	88	86	81
EU (25 countries)	100	88	87	85	80	78	75	72	72
EU (15 countries)	100	91	88	85	80	78	75	74	73 ^(p)
Ireland	100	:	:	:	100	121	84	117	83

(:) Not available

(p) Provisory

(*) The index shows the evolution of the incidence rate of fatal and serious accidents at work in comparison to 1998 (= 100). The incidence rate = (number of accidents with more than three days away from work or number of fatal accidents at work that occurred during the year/number of persons in employment in the reference population) x 100,000. An accident at work is a discrete occurrence in the course of work that leads to physical or mental harm. This includes accidents in the course of work outside the premises of one's business, even if caused by a third party, and cases of acute poisoning. It excludes accidents on the way to or from work, occurrences having only a medical origin, and occupational diseases.

EU-15: Austria, Belgium, Denmark, Finland, France, Germany, Greece, Ireland, Italy, Luxembourg, Netherlands, Portugal, Spain, Sweden and United Kingdom

EU-25: EU-15 + Estonia, Latvia, Lithuania, Poland, Czech Republic, Slovakia, Hungary, Slovenia, Cyprus (without the northern part of the island) and Malta

EU-27: EU-25 + Bulgaria and Romania.



Founded in 1991, EUROGIP is a French organization, whose activities are organized around five areas: enquiries, EU projects, information-communication, standardization and coordination of notified bodies. All have in common European aspects of the insurance or the prevention of accidents at work and occupational diseases.

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