

ORR 5th Annual Trade Union Safety Representatives Conference

Descriptions for the Group Sessions 3rd November 2015

1. Neurodiversity and its implications for health, safety and welfare

Neurodiversity is a term referring to a group of neurological development disorders which share common features, in particular differences in how people learn and process information. Definitions vary, but here we use the term to refer to dyslexia, dyspraxia, dyscalculia, Attention Deficit Disorders (ADD/ADHD) and Autistic Spectrum (Autism / Asperger's syndrome).

The neurodiverse often prefer to describe themselves as having a different set of skills, abilities and ways of seeing the world which may be very helpful in some situations and less so in others. With appropriate support it is possible to be highly successful and many people find niches in which they can flourish. A neurodiverse condition has implications for health, safety and welfare at work, some obvious, many less so.

Many workers are unaware that they are neurodiverse. Identification of those that are potentially neurodiverse and then giving them access to diagnostic assessments is key to ensuring that suitable adjustments are made, and adequate risk assessment is undertaken.

For example, some people with dyslexia are easily distracted, finding it difficult to focus on one task at a time. Others have difficulty simultaneously processing auditory and visual information. There are obvious implications for a dyslexic worker in undertaking many roles in the rail industry where such processing is integral to the post, such as a signaller. However, there is no reason why those with neurodiverse conditions should not, with the right management and support, be able to pursue fulfilling railway careers that do not compromise the health, safety or welfare of themselves or their colleagues.

The neurodiverse may be seen as 'accident prone'. High levels of victimisation, bullying, stress and mental health problems can arise amongst the neurodiverse from a misunderstanding of neurodiversity both by employers and by colleagues. Neurodiverse conditions also carry the risk of psychological and emotional injury – by the time a neurodiverse person reaches adulthood they will probably have been struggling for many years with difficulties that may never have been recognised or understood. The original difficulties are likely to be bound up with many unpleasant emotions, including anger, confusion, embarrassment, anxiety and depression. Confidence and self-esteem may also be low, and research shows links between that and poor mental health, including increased levels of stress, anxiety and depression.

Often, providing information to individuals and employers and making a few simple reasonable adjustments to the working environment is all that is needed to support the individual to develop to their full potential and make working a much more positive experience.

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The workshop will consider these issues and discuss how health and safety reps can work with members and employers to safeguard the health, safety and welfare of both workers with neurodiverse conditions and their colleagues.

2. Mild cognitive impairment

Dr Russ has agreed to lead this workshop, building on the concepts introduced in his speech. His workshop will expand on the medical and psychological issues related to the ageing workforce and will discuss practical ways in which the issues can be dealt with. These will be invaluable when carrying out risk assessments and incident investigation.

Being able to recognise mild cognitive impairment and knowing what to do if you think a person is suffering from this will be invaluable in your work to understand and support colleagues who may be finding life just that little bit more difficult.

This workshop is particularly suitable for reps with an interest in mental health.

3. Gender Issues

Everyone has an equal right to protection from harm at work but that doesn't mean treating everyone as if they were all the same!

Recent research has shown that both sex (biological differences between women and men) and gender (socially determined differences) affect workers' health and safety in many ways. These differences are too often ignored or misunderstood, leading to failures in prevention.

Gender stereotyping (e.g. 'women's work is light work' or 'stress is for wimps') or stereotyping in relation to different categories or work (eg manual and white-collar jobs), or simply forgetting that we come in all shapes and sizes when it comes to PPE, can also lead to false assumptions about who is or is not at risk in the workplace. As a result important opportunities for prevention can be missed when planning work and carrying out risk assessments.

This interactive workshop explores gender-sensitive risk assessment in the rail industry and what unions, union safety representatives and the regulator can do to ensure that women and men have equal protection.

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4. Applying the principles of risk assessment to health issues.

Risk assessment has been around for at least 10 years now, and it is fair to say that carrying out risk assessments on physical risks is pretty well established. But what about health risks? How do you assess the risks to a person's health? What do you take into account? And what has equality, diversity and ageing got to do with it?

Dr Claire Dickinson and her team will be having a good go at answering these questions. She will be looking at the control of stress and the control of ballast dust to explain the principles underlying a successful assessment of health risks. And as well as describing the basic principles, she will examine health risks through the lens of equality, diversity and ageing. For example:

- Women vs. men – are there differences that need to be taken into account?
- Diversity in health (good vs. poor health) e.g. how do you capture relevant risk factors associated with poorer health e.g. stiffening limbs, less stamina, less mental resilience etc.
- Ageing – how do we change from young to old e.g. can older people handle stress more or less easily than younger people, are there different stressors for younger and older people, do we need different control measures for younger or older people? Is age even relevant or is it simply a form of discrimination?

This will be a challenging and informative workshop for all reps interested in health matters.