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Health and Safety Management of Offsite Construction: how close are we to production manufacturing

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Keywords: Safety, health, Offsite production, manufacturing.

Producing buildings in a factory, Offsite Production (OSP), dramatically improves overall health and safety performance, but there is no room for complacency. This paper presents the results of a questionnaire and interview survey using multiple sources of data linked with peer debriefing from eight major offsite production facilities. In particular, health and safety benefits along with the trend toward a production manufacturing environment are identified. The research found that attitudes toward production oriented health and safety in OSP are still in the embryonic stage, but are developing rapidly with increased awareness from management. To realise the positive outcomes from the health and safety benefits that OSP entails, OSP manufacturers must adopt a mindset akin to that already existing in the mainstream manufacturing sector. Many OSP manufacturers adopt site based techniques “under cover” of a factory. The health and safety benefits of OSP may be well understood and promoted in several arenas, academia, government initiatives and the health regulatory bodies, but unless the manufacturers themselves embrace the full health and safety potential of OSP, misunderstanding and ignorance will remain a barrier to improved health and safety performance. This work formed part of a UK government funded project, HASPREST.

Introduction

The goal of this paper is to identify how close the current offsite production (OSP) facilities in the UK are to the manufacturing sector in terms of health and safety practice. The results of an interview survey and observations from a significant number of major offsite production facilities are presented. In particular, health and safety benefits along with the trend toward a production manufacturing environment are identified. This work formed part of a UK government funded project entitled HASPREST.

The OSP industry is an important emerging sector in modern economies. OSP industries coupled with related industries such as the manufacture of building products and systems, designers, and property developers account for approximately 15 per cent of the national product of most countries (Seaden, Manseau 2001). The main factors influencing the development of OSP are the performance of the economy, levels of investment, and developments in materials technology, production, and installation equipment, government regulations also impact on the market. In terms of OSP growth trends, during the early 1990s there was little growth due to the recession and reduced construction and industrial investment, however, 1999 and 2000 showed a moderate improvement in growth with an overall growth forecast for 2006 of 8 per cent (AMA research 2002). The expected increase in modern methods of construction and the desire for more innovation in construction, fuel the belief that there will be an increased contribution to economic growth and hence an increase in OSP. It is argued, however that problems of poor rates of investment especially in research and development, coupled with poor communication between academia and industry (Dulaimi et al. 2002) contribute to the view that the industry has much more potential to innovate. This is supported by (Tatum 1991) who adds that the construction industry professionals must review their need to innovate and work in close partnership with Government.

The UK construction industry has a lower fatal accident rate than most other EU member states and the US (Eurostat 1996). A similar situation exists for non-fatal accidents. However, one third of all work fatalities in the UK happen in construction and it’s employees are six times more likely to be killed at work than employees in manufacturing (HSC 2001a). A number of high profile initiatives have been carried out that address the industry’s poor health and safety record. These include Rethinking Construction (DETR 1998) and Accelerating Change (Strategic Forum for Construction 2002). Despite these efforts, from the “league table” of industries, construction still has one of the highest rates of fatal and major injuries (HSC 2001a). The industry continues to survive with a poor record of health and safety performance, inadequate training, and irresponsible contractors who minimize their risk by transferring it back to the employees. Many contractors are embracing
the drive toward OSP, which is the manufacture of construction elements, components, modules and complete
buildings in a factory environment. OSP is changing the causal relationship between accidents and construction
methods and while the health & safety risks reduce with OSP, the actual hazards change and these need to be
considered carefully throughout the project process.

In the last twenty five years there has been a marked effort to attempt to improve the management of health and
safety in the construction industry to address this lack of performance. Surveys commissioned by the Health
and Safety Executive (HSE) have identified that poor management leads to 75 per cent of the causes of fatal
accidents (HSE 1988) and that health and safety risks during a project need to be managed correctly (HSC
1995b).

**Research method**

Site interviews and ergonomic audits

The main background to this research is described in (McKay et al 2002). Detailed questionnaires, ergonomic
assessment forms, manual handling assessment forms and both semi structured and focused interviews were
used to identify the OSP company’s health and safety practices. The purpose was to identify how OSP can
improve health performance and reduce accident risks, and how this data can be used to develop health and
safety improvement strategies. Best practice examples were noted from the manufacturing industry in particular
car production and the manufacture of aluminium products for the building industry.

The sample

In the main those interviewed were experienced managers with responsibility for health and safety or operatives
who actually performed the tasks within the OSP facility. The OSP companies were representative of the type
of product mix currently available in the UK OSP market. They included eight companies from the
construction and OSP building sector (i.e. the manufacture of structural and architectural precast concrete
elements and modular buildings, mainly for the residential and education sector), two of the companies were
from the manufacturing industry. The information obtained to some degree reflects their own experiences and
opinion. The eight OSP companies were manufacturers who generally were responsible for installing the OSP
units. Access to the companies was through steering group participation as well as through the European
Construction Institute, an organization made up of clients, contractors, architects, construction professionals and
the various trade associations.

Interview schedule

The observations and interviews at each company were split in two parts. The first part took the form of a two-
hour interview based on the channel framework as proposed by (Reason 1991). The importance of maintaining
a regular and consistent record and analysis of these proactive safety state indicators, in order to ensure that
managers are in touch with the companies health and safety “state of health”. The interviews were recorded by
the researcher. To ensure validity multiple sources of data were used (triangulation) and critical discussion with
peers (peer debriefing) along with allowing the sample to respond to the interview interpretations (member
checking) were used. This method ensures research rigour after (Erlandson et al., 1993). A summary of the
type of questions asked is given in Table 1.

<table>
<thead>
<tr>
<th>Questions and issues</th>
<th>Details of project data, where is the data kept, is the data analysed for causal factors, what are the causation factors</th>
<th>Definition of unsafe act, what is/is not deemed unsafe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Channel 1 Reporting systems</td>
<td>Details of project data, where is the data kept, is the data analysed for causal factors, what are the causation factors</td>
<td>Definition of unsafe act, what is/is not deemed unsafe</td>
</tr>
<tr>
<td>Channel 2 Unsafe act</td>
<td>Definition of unsafe act, what is/is not deemed unsafe</td>
<td></td>
</tr>
</tbody>
</table>

Table 1 Sample of the type of questions and discussion points during interviews (Excerpt).
The second part of the observation and interview process involved direct observation and interview at workstation or on site to enable an understanding to be made of the operatives views on the effects of the work on their health and their willingness to adopt to changes in work. Task analysis was carried out on all of the production processes and installation methods observed (manual handling, use of tools, access to the work and interaction method with automation and plant) to identify the health risks involved. Ergonomic assessments were made of the various installation methods to provide a measurement of the loading on the operatives’ bodies and an indication of the necessity for change. The RULA (rapid upper limb assessment) postural analysis tool as described by (McAtamney, Corlett 1993) was used for this work in parallel with ergonomic checklist observation sheets. Table 2 overleaf shows a summary of the issues addressed.

Table 2 Sample of the type of observations and ergonomic issues at workplace inspection (Excerpt).

<table>
<thead>
<tr>
<th>Observation and ergonomic issues</th>
<th>Workplace data</th>
<th>Ergonomic data</th>
<th>Manual handling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visitor control, PPE (Correct type, available, worn), Noise, Air quality, Lighting, Trip hazards: inadequate space for legs and feet, headroom, avoiding twisting, steps, stairs, ramps</td>
<td>Required height: Activity suitable for workers between 5’ and 6’5”: Extension of arms: Movements required for reach up to 30cm (1’): Grip: Power grip only Trunk movement: Large movements bending under 90 degrees</td>
<td>Load: Difficult to handle due to: Weight, height, width, depth, unevenly distributed when carried, difficult to grasp, sharp at corners edges, constructed of unsound material, problem of a two handed power grip.</td>
<td></td>
</tr>
</tbody>
</table>
Task analysis

Risk apparent with: standing posture, sitting posture, prolonged actions, pushing, pulling, twisting, stooping, reaching forward, overhead, peaks in workload, working without break, job organization, unsuitable tools, mechanical aids, imposed work rate

During this observation and interview process copies of any method statements, risk assessment, accident reports, health and safety policies were obtained as evidence to support and prompt discussion during the interviews.

**Results and discussions**

A full analysis of the results is out with the scope of this paper, however a discussion of the main health and safety benefits observed in OSP are described, this data formed the main deliverable of the HASPREST Dti research project.

The HASPREST project demonstrated that by taking the work away from the construction site, into a factory, the control of risks is increased. Simplistically, the manufacturing sector is between 4 and 6 times safer than construction (UK statistics on fatal and major accidents). Furthermore, although these statistics are heavily influenced by the large ‘non-construction-related’ manufacturing sector, there is still evidence that manufacturing for construction is safer for a number of reasons, including:

- Risks are less as they are easier to control
- Training is easier to achieve
- There is less trade overlap
- There is a much lower workforce turnover
- People ‘look out’ for one another
- The adverse weather factor is removed (Gibb, 2003)

The main thing that happens to on-site risks by using OSP is that the many, common-place, high-likelihood, low consequence risks are largely replaced by fewer, higher potential consequence risks, which are much less likely to occur as they tend to be easier to identify and control.

![Figure 1 What happens to risk through increased use of pre-assembly (Gibb, 2003)](image_url)

In total some 40 audits were carried out, over the ten companies. And of those audits the organisations were ranked in the following way, three OSP companies in the author’s opinion were approaching production manufacturing attitudes towards health and safety. Two made some efforts and three were no different to that of an average construction site. The two manufacturing companies were used as a comparison with the
manufacturing sector (Man 1, Man 2 in figure 2). The audit found, that in terms of workstation layout, ergonomic consideration of the task, use of tools and the support and training systems in place, coupled with the health monitoring systems in place the companies were ranked as shown in figure 2.

![Bar chart showing the Mean Audit Score for different organisations](image)

Figure 2 OSP organisations ranking with regard to providing an indication of how close they resemble production manufacturing attitudes toward health and safety. (1 = low, 10 = high)

The key issues were that those that were approaching production manufacturing attitudes toward health and safety, had considered and invested in ergonomic consultation in terms of workplace and workstation layout design. Consideration of the task and how the operative interacts with tools, noise, lighting, climate, vibration etc had been considered for the relevant task. Continuous health monitoring systems were in pace to monitor the operatives health on a weekly basis through blood analysis and regular reports from the company physician. The shift patterns were rotated on a 3 shift pattern, representation from the workforce had been actively encouraged and included in shift design.

Key issues relating to those that were poor at approaching production manufacturing attitudes toward health and safety, included workplace layout that was similar to site based conditions, little regard of operative task, to no consideration of delineated zones for material storage, component or module production, poor feedback from employees regarding production, high staff turnover and violation of safety rules.
How can OSP manufacturers take appropriate action to reduce the health and safety risks and learn from manufacturing?

Factory manufacture of multi-service distribution modules

This case study illustrates the following main benefits which were identified following interviews and audits conducted over several visits. The distribution modules were manufactured by Crown House Engineering. In normal practice the ductwork and cabling would be installed on site after the suspension brackets and trays were welded in place. However, in this project the units were fully finished with all internal cabling and ductwork installed at a convenient bench height at Crown House’s manufacturing works before the units were transported to site (Figure 3). The audits at the organisations sites found that the main benefits were:

- Reduced construction programme
- Better control of welding operations
- Elimination of the need for working at height
- Elimination of the need for site scaffolding
- Less risk of contamination
- Less risk of trips, slips, falls
- Materials are mechanically handled right to the workface
- Work in open spaces as against the confined spaces on-site
- Significantly lower trade overlap and interface
- Work at workbench level, with reduction in MSDs, as no crouching required, safer workbench level inspection possible
- Elimination of working at heights
- General welfare facilities better in the factory environment

As a result of these HASPREST then produced a CD, part of which involved the development of checklists to help managers understand what to look for in terms of health and safety. Table 3 is adapted from the HASPRST CD and illustrates a checklist that has been developed from this work to show what aspects should be considered by OSP companies to improve health and safety performance:

Table 3  How Manufacturing can reduce health and safety risks (Excerpt)

<table>
<thead>
<tr>
<th>Main operations affected</th>
<th>H&amp;S issues</th>
<th>How manufacturing can reduce H &amp; S risks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deliver materials etc to factory</td>
<td>Various</td>
<td>PPE typically employed on construction sites is not necessarily enforced in many manufacturing facilities (e.g. head protection is rarely used). However, the manufacturer should be able to demonstrate that the risks have been assessed and the appropriate hierarchy of risk elimination, reduction and control has been employed</td>
</tr>
<tr>
<td>Assemble frame structure</td>
<td>Manual / mechanical handling</td>
<td>Weight and centre of gravity and safe lifting points should be clearly identified on each element to facilitate mechanical and manual handling where appropriate</td>
</tr>
</tbody>
</table>
Conclusions

This paper has argued that the OSP industry in the UK can benefit in terms of health and safety by taking best practice and innovative techniques from the manufacturing industry. One of the main things that can be done is to increase the amount of ergonomic design consideration in the workplace and utilise new safeguards such as health monitoring and surveillance. These health systems are not new and have been in operation in the manufacturing industry for many years, but action by OSP managers early in the design and planning stages for OSP will help to eliminate certain hazards and transform the working environment so that the safety and occupational health of operatives are improved and can be controlled.

The survey found that many OSP manufacturers still adopt site based techniques “under cover” of a factory. Although there was a desire among those interviewed to see an increase in production-oriented techniques, there was observed a lack of management focus towards production orientated practice. The health and safety benefits of OSP may be well understood and promoted in several arenas, academia, government initiatives and the health regulatory bodies, but unless the OSP industry embrace a manufacturing culture, the opportunity for increased health and safety performance may be delayed reducing protection to operatives health.

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References


Eurostat (1996) Accidents at Work in the EU in 1996 - Statistics in FOCUS, Theme 3 - 4/2000,


