



ORIGINAL ARTICLE

The role of union health and safety representatives during the COVID-19 pandemic: A case study of the UK food processing, distribution, and retail sectors

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Funding information

Trade Union Congress

Abstract

This article highlights the weakness of the UK's occupational health and safety infrastructure exposed by the COVID-19 pandemic. Utilising a political economy perspective, it captures the critical role of workplace union safety representatives in mitigating risk and contesting the expropriation of health and recommodification of labour, specifically inadequate sick pay.

1 | INTRODUCTION

COVID-19 has laid bare UK workplace health and safety and revitalised occupational health and safety (OHS) as an arena for conflict. This article explores OHS in the food production, distribution and retail sectors during the pandemic. Specifically, it examines the joint regulation of OHS in the workplace and the role that union health and safety (HS) representatives have played. The article asks how far the pandemic has invigorated existing structures of OHS representation. Echoing the political economy perspective advocated by Nichols (1997), this study points to the deregulation of workplace OHS and extends

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Navarro's (1982) concept of the relative expropriation of health in a different historical and epidemiological moment. The paper suggests that, for frontline workers, COVID-19 exposed the implications of the recommodification of labour over the past decades, specifically limitations on access to occupational and statutory sick pay (SSP). It highlights how union HS representatives contested sickness and absence policies to prevent infection at the workplace, suggesting that recommodification is a process and also the site of struggle.

The pre-pandemic OHS literature provided consensus on the positive impact of union presence and participation over exposure to risk at work (Frick, 2011; Robinson & Smallman, 2013). In particular, awareness of OHS representation makes a difference in self-reported preventive action by workers (Ollé-Espluga et al., 2015). However, the absence of union representation in the UK's OHS system has facilitated 'a structure of vulnerability' (Nichol, 1997, p. 154). The last Workplace Employment Relations Survey (WERS) reported that two-thirds (66%) of UK workplaces had adopted direct methods of OHS representation (van Wanrooy et al., 2013). Evidence also suggested that UK managers did not differentiate between union and non-union arrangements in their assessment of OHS representation effectiveness (Bryson, 2016), despite that historically the latter have fewer resources and lack independence (Walters, 1983). During the pandemic, UK employers were criticised for prioritising financial interests over labour protection while dismissing concerns raised by union HS representatives (Watterson, 2020).

OHS research has primarily focused on the sectors with frequent exposure to industrial injuries (Fan et al., 2020), paying limited attention to the food sector that was critical in the pandemic. Based on seven organisational case studies and a survey of 121 managers in the food sector, this article draws on multiple conceptual lenses from the sociology of work, political economy, and the organisational and labour process literature to examine OHS representation and processes at the workplace level. It starts by describing the UK OHS representation system and conceptualising workplace HS. It then sets out research methods before outlining key findings including on representation structures and the concrete role played by HS representatives, especially over sick pay and absence. In highlighting the importance of sick pay in risk prevention, it suggests the implications of labour recommodification in global health crises.

2 | THE UK OHS REPRESENTATION SYSTEM

The UK adopts a tripartite system of OHS representation that gives unions the right to appoint HS representatives while permitting employers to directly consult with workers in establishments without recognised unions. The Safety Representatives and Safety Committees Regulations stipulate that union HS representatives should represent all workers in the establishment where the union is recognised, regardless of whether the workers are union members. They require employers that recognise unions to form a joint HS committee if requested by two or more union HS representatives. Despite such legal provisions, the legitimisation of direct methods means consultation may be limited to the provision of information (Nichols & Walters, 2009). WERS 2004 revealed that very few employers involved workers in meaningful OHS consultation (Robinson & Smallman, 2013).

The effectiveness of OHS representation is subject to the mechanisms of legal enforcement and the power dynamics of employment relations (James, 2009). Regulatory frameworks that

endorse employer discretion over forms of OHS representation have limited operational capacity, especially in the context of non-standard work arrangements and declining trade union presence (Loudoun & Walters, 2009). One study showed that nearly 40% of unionised workplaces workers have been denied legal rights to OHS representation (Robinson & Smallman, 2013). Managerial resistance to regulatory requirements for worker participation has been evidenced in the NHS, albeit with some support for union representation (James & Kyprianou, 2000). The absence of management commitment emerged in a study of three unionised meat-processing factories, highlighting the role of supply chain pressures (Lloyd & James, 2008). Limited worker participation is further indicated in low employee control over workplace risk according to the Human Resource (HR) managers who responded to WERS 2011 (Bryson, 2016).

The impact of union representation in achieving the best OHS outcomes is widely recognised (Frick, 2011), although arrangements with either union or non-union HS representatives are found more effective than workplaces without any arrangements (Nichols et al., 2007). Union membership is a key determinant of a positive safety climate (Le et al., 2021) and workplaces with union representation tend to report more injuries than non-unionised workplaces (Fenn & Ashby, 2004). The presence of union HS representatives is found to reduce the level of risk perceived by managers and workers while encouraging OHS compliance (Bryson, 2016).

3 | CONCEPTUALISING WORKPLACE HEALTH AND SAFETY

The regulations governing OHS centre upon an assumption that employers and workers have shared interests in OHS, neglecting widely evidenced conflicts between corporate priorities of profit and the safety of workers (Frick, 2011; Nichols & Walters, 2016). A shift of OHS responsibility and accountability from employers and regulatory bodies to workers (Gray, 2009) is reminiscent of a narrative in which OHS outcomes reflect individual characteristics pertaining to 'accident proneness' (Sheehy & Chapman, 1987, p. 204), failing to acknowledge the impact of organisational conditions such as safety climate (Zohar, 2010). Prior scholarship has established that accidents and injuries at work are 'socially produced' (Nichols, 1997, p. 81), highlighting the role of structural relations at both the macro and organisational level in shaping workplace HS (Dwyer, 1995). Structural relations are characterised by the struggle between capital and labour over the 'expropriation of health' (Navarro, 1982, p. 13). While it was suggested that in 'developing' countries expropriation occurred primarily through the extraction of absolute surplus value, in 'advanced' economies it was through the extraction of relative value (Navarro, 1983). Under COVID-19, the outcome of the struggle is reflected in regulatory failure associated with the political climate (James, 2021). An extensive literature has established the importance of the political economy of health to health inequalities (Harvey, 2021) and the same is true for OHS. Political and economic structures, relations, and processes are inseparable. The absence of state support for collective bargaining has contributed to declining union presence and increasing popularity of direct methods. The UK's tripartite system exposes workers to a structure of vulnerability (Nichols, 1997; Walters & Nichols, 2007, 2009) with a legacy of limited or no inspections and regulatory interventions in workplaces. The inadequacy of Health and Safety Executive (HSE) resources and the long-term

infrastructural deficit has exacerbated the vulnerability of workers during the pandemic (James & Walters, 2019).

This article extends Navarro's (1983) concept of the relative expropriation of health in a later historical period. The focus on access to sick pay is framed by the recommodification of labour over the past decades, something that takes on a particular significance during a pandemic. Greer (2016) has identified that recommodification is integral to so-called 'precarious' or non-standard work. Recommodification is realised through reductions in occupational sick pay for workers on 'standard' contracts, particularly newly recruited or young workers, and through the increased use of agency, 'self-employed', and zero or minimum-hour contracts where workers have no or limited access to occupational sick pay (Moore et al, 2018). Frontline workers were often on such contracts that transfer responsibility for sickness, holidays, and pensions to the individual worker and access to sick pay is thus differentiated by contractual and also migrant status. Navarro noted that the use of migrant labour reduces the costs of the reproduction of labour power. Rosewarne (2010, p. 105) discusses commodification in relation to migrant labour with limited social protection, pointing to 'a more comprehensive process of commodification than that generally associated with wage labour within capitalism'. In the UK, migration is sanctioned by instituted economic processes (Behling & Harvey, 2015) based on the hostile environment and no recourse to public funds, excluding migrant workers from free healthcare, while non-European Union migrants are dependent on employers for work permits. Challenging recommodification as determinate, Katta et al. (2020) suggest that Uber drivers have had their labour at least partially decommodified with the introduction of 'global sick pay' to support drivers diagnosed with COVID-19. This argument is resonant with Polanyi's (2002) concept of commodification as a *process* and the site of struggle reflected in his notion of 'commodity fiction'. There is no teleological progression from decommodification to recommodification. Decommodification and recommodification are not absolutes, something particularly clear from a gender perspective. The introduction of sick pay in the early 20th century for largely male employees did not represent full decommodification across the workforce. The research presented below highlights the role of HS reps in contesting access to sick pay in the pandemic.

4 | RESEARCH CONTEXT

This research focuses on the food sector, classified by the UK Government (2020) as a key sector in the pandemic, with workers deemed as 'essential' and working throughout. The sector is characterised by low-paid and non-standard employment contracts with relatively high proportions of migrant and agency workers (Lloyd & James, 2008). The structural vulnerability of the workforce in food processing and production is intensified by supply chain pressures from supermarkets (Lever & Milbourne, 2017). In response to such pressure and 'just-in-time' systems, food manufacturers deploy temporary labour and utilise temporary work agencies to provide short-term numerical flexibility to meet unpredictable fluctuations in supermarket demands (Caroli et al., 2010; Thompson et al., 2013).

The pandemic has exposed food sector workers, particularly in meatpacking and processing plants, to further OHS risks internationally (Middleton et al., 2020). Workers in food processing face a high risk of infection not only at their workplaces where social distancing is difficult to maintain but also in their commutes to work through public transport or car-sharing (Aday & Aday, 2020). A US study suggested that food retail frontline workers were five times more likely

to have tested positive for COVID-19 than their colleagues in non-customer-facing roles (Lan et al., 2021) with inadequate social distancing and intense customer interactions (Cai et al., 2021) heightening psychological risks.

Regulatory weakness during the pandemic is evident. Despite at least 1461 infections and six deaths among the UK food manufacturing workforce, just 47 reports were made to the HSE (2021) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013 (Martin, 2020). RIDDOR exemplifies the UK's self-regulatory approach, leaving employers to make judgements on the causes of accidents or dangerous occurrences. Self-regulation had critical implications for worker representation and organisation around OHS issues during the pandemic given the evidenced impact of the previous economic crisis on collective bargaining (Brandl & Bechter, 2019). Unilateralism was the dominant UK employer response to the 2008 recession (López-Andreu, 2019). While union density was a factor in moderating job insecurity in the UK private sector during the recession (Wang et al., 2021), studies of other European countries highlight the importance of concession bargaining in exchange for job security in times of crisis (Delahaie & Perez, 2021; Roche & Teague, 2015). The UK's unilateral response during previous crises implies similar challenges for collective representation under COVID-19.

5 | RESEARCH DESIGN

This mixed-method research commissioned by the Trade Unions Congress (TUC) sought evidence of the role of HS representatives during the pandemic based on seven case studies and a survey of employers. The case studies include two food production companies, one food production/distribution company, two food distribution companies, and two food retailers (Table 1). All but one workplace had a recognised union involving four national trade unions. There were varying proportions of migrant, agency, and female workers. The case studies involved semi-structured interviews with 17 key actors, including managers, workers, HS representatives, and union officers. A purposive sampling method was adopted to recruit these key actors through TUC networks, supplemented by a snowballing approach where union participants facilitated access to employers. The interviews were conducted between December 2020 and January 2021 via phone calls or an online communication platform with informed consent and in line with HS precautions adopted during the pandemic. The case studies have been anonymised.

The interviews were recorded and transcribed verbatim. Template analysis (King, 2012) was utilised to identify themes inductively and to develop a tentative coding structure based on the initial reading of the transcripts. The researchers collectively reviewed and refined this tentative structure with consideration of how the emerging themes relate to the literature. A coding template was finalised and deductively applied to all the transcripts.

Difficulties in securing responses from a more representative sample of employees means the survey is based upon a dataset purchased from Survey Monkey, which generated 121 valid responses from the food sector: 71 from food retail and 50 from food manufacturing and distribution. Just under one-third (31%) were from large organisations (250+ employees); 28% from medium-sized organisations (50–249 employees), and 41% from small/micro-sized organisations. The survey covers managers in a range of roles, including general managers (21%), middle managers (17%), business owners (13%), non-HR senior managers (13%), HR managers/directors (12%), and line managers (12%). The majority (80%) reported that at least

TABLE 1 Case studies sector, union representation, workforce, and interviewees

Case study	Sector	Representation	UK workforce	Interviews
FoodCo	Food production	Union recognition	2000 (900 in the case study); 50% women; predominantly agency workers; 25% migrant workers	1 manager 1 union representative
SeafoodCo	Food processing	Union recognition	3000 across three sites; 50% women; 33% agency workers; 20% migrant workers	1 manager 1 union representative
PoultryCo	Food processing	Union recognition	1500 (300 in 2 case-study sites); 40% women; few agency workers; 50% migrant workers	1 union officer 1 union representative
FastFoodCo	Food retail	No union recognition, limited union membership	120,000; 50% women; zero-hour contracts; 20% migrant workers	1 union organiser 1 campaigner 1 worker
SupermarketCo	Food retail	Consultation and representation agreement alongside direct representation	100,000; 56% women; dedicated labour agencies used for recruitment	2 workers 1 union officer 1 manager
DistributionCo	Food distribution	Union recognition	5500 (600 in the case study); 15% women; 15% migrant workers; some agency workers recruited during COVID-19	1 union representative 1 manager
SupplierCo	Food distribution	Union recognition	7000; 11% women; few migrant workers; predominantly permanent contracts with 10% agency workers recruited under COVID-19	1 union officer 1 manager

Abbreviation: COVID-19, coronavirus disease 2019.

half of workers were designated as essential, and 29% reported that *all* workers were essential (only 7 per cent reported no essential workers). Over one-quarter (29%) reported that their organisation employed migrant workers. Based on the respondents' estimate of gender breakdowns in their organisations, women comprised 44% of the workforce in food retail and 49% in food manufacturing and distribution.

On the basis that all but one case study had trade union representation, they are exceptional, the manager survey provides a wider picture of worker HS representation in the food sector and the overall weakness of OHS infrastructures.

6 | KEY FINDINGS

6.1 | The HS infrastructure

The survey reveals the weakness of the UK's OHS infrastructure and representation at organisational and workplace levels. Table 2 shows that before the pandemic, half (50%) of managers in food manufacturing and distribution reported that there was an HS committee at the workplace level and just over a third at the organisational level (36%). Half (52%) of respondents from food retail reported the existence of an organisational level HS committee and 38% at the workplace level. Just under half (45%) of food retail managers and just over a third (36%) of food manufacturing and distribution managers said that there was an HS management team in their organisation, which was more frequent in larger food sector employers. Only small proportions of managers reported that there were union HS representatives at either the workplace or organisational level in both food retail (16% at organisational and 10% at workplace) and food manufacturing and distribution (8% and 6%). Higher proportions said there were non-union HS reps at the organisational level (25% and 16%, respectively).

Table 2 suggests that the pandemic prompted a limited expansion of OHS representation. Managers reported that in food retail union representation increased by 4 per cent at both organisational and workplace levels during COVID-19. In food manufacturing and distribution, union representation increased by 2 per cent at the organisational level but remained the same at the workplace level. Non-union representation also increased. A 10% increase in HS Committees was reported at the workplace level in food retail and a 12% rise at the organisational level in food manufacturing, with indications of changes between levels of representation in each sector.

Three-quarters of managers (74%) in food manufacturing and distribution and 78% in food retail reported that a COVID-related risk assessment had been put in place since March 2020. Just over one-third (38%) of these reported that it had been shared with HS representatives; only 17% said they shared it with a recognised union.

All case-study organisations except the non-union FastfoodCo had HS bodies with union representation. There was a national union campaign to organise workers at FastfoodCo and a worker involved highlighted the difficulties workers had in raising concerns in the absence of workplace representatives:

I think they need to be held to account sometimes through the fact that they are making it unsafe, and especially in a pandemic and especially with how dangerous the virus can be for the elderly. And these people are still working and there's no

TABLE 2 Health and safety structure based on survey responses

	Pre-COVID		During COVID	
	Food retail (%)	Food manufacturing and distribution (%)	Food retail (%)	Food manufacturing and distribution (%)
Union representation at the organisational level	16	8	20	10
Union representation at the workplace level	10	6	14	6
Non-union representation at the organisational level	25	18	31	14
Non-union representation at the workplace level	17	12	20	14
Health and safety committee at the organisational level including employee representatives	52	36	49	48
Health and safety committee at the workplace level including employee representatives	38	50	48	42
Dedicated health and safety officer	34	24	32	26
Health and safety management team	45	36	38	40

Abbreviation: COVID-19, coronavirus disease 2019.

one there to say that you're not supposed to be doing that. And we feel as workers sometimes they don't take us seriously and I think it would be really good to have someone.

The case studies demonstrated that existing formal OHS structures provided the necessary basis for informal and frequent dialogue with managers during the pandemic, often on a day-to-day basis, drawing on the HS representatives' expertise and training. While national union officers often communicated with senior managers the onus was on, often daily, liaison between local managers and HS representatives described as a 'COVID Taskforce' by a number of respondents.

6.2 | The role of HS representatives

The findings highlight the proactive role played by trained union HS representatives whose actions reflected their embeddedness in the labour process with intimate knowledge of how the organisation of work created risk, particularly in terms of social distancing and productivity targets. DistributionCo had 90 HS representatives over seven sites with the leading representative known as 'the Covid King' because of his forensic daily examination of changes to guidance. Workers approached representatives for advice, particularly when the employer furloughed its own full-time HS team:

And what they did is they furloughed them all in the middle of a global pandemic. So effectively they were doing their safety from home and it was me and the other safety reps who were basically running the show, feeding back to them saying "well this is what we've done". And they were just saying, "Oh we'll just check on the legality of it and we'll get back to you". They basically left us to do it because they know we know what we're doing.

The union proposed the introduction of COVID marshals, who were warehouse operatives, to ensure social distancing. It oversaw the introduction of eight on-site portacabins accommodating extra restrooms and toilets and a union office where workers could contact representatives.

PoultryCo had a new team of 24 HS representatives across two sites, although they struggled to get agreed time off for HS training. Since the workforce comprised high proportions of migrant workers and British Black and Minority Ethnic workers, the union tried to ensure diverse teams. At one site, the representatives faced issues obtaining basic personal protective equipment (PPE), with one stating 'I banged on every door!' At the other site, the union brought a successful collective grievance against the employer, signed by members, demanding screens, face visors, sanitising units, smoking shelters, and social distancing measures in canteens, plus the relocation of locker rooms to ensure workers were not congregating in small areas. The union also ensured that senior HS representatives sat in on interviews with migrant workers required to undertake a COVID-19 risk assessment. Moreover, the union played a key role in disseminating risk assessments and safety messages in a range of Eastern European languages.

FoodCo had 10 accredited workplace HS representatives that met twice daily during the pandemic, placing information on notice boards and producing a weekly email for members.

As with PoultryCo, the representatives at FoodCo did not feel that the employer had responded to the outbreak of the pandemic with sufficient urgency:

There was an increasing sense of fear and panic within our membership and our colleagues ... and to be frank, we had a very “*full and frank discussion*,” I think would be the best way of describing it. And we were particularly angry of what we perceived to be a lack of execution of the duty of care that the company had towards its employees. We left that meeting and the following day, the factory manager, to his credit, pulled us back in, his exact words were “following the bollocking you gave me yesterday.”

The manager convened an onsite COVID working party, taking two union representatives off shift to spearhead improvements. Representatives ‘continually walked the site’ and played a key role in urging the employer to maintain restrictions over the summer when national measures were lifted.

The wider literature points to the link between industrial injury, labour intensification, and productivity pressures reflected in the food production, distribution, and retail sector where workers became vulnerable with changing and heightened demand. In the second lockdown, FastfoodCo moved to drive-through takeaway and delivery only and recruited additional staff to meet demand in response to the Government’s ‘Eat Out to Help Out’ scheme. Work intensified with competitions between restaurants and prizes given to managers whose shifts served the quickest, constraining social distancing:

To be the quickest store sometimes safety is compromised because people—they’re encouraged to work as quick as we can, so sometimes it’s easy to forget that we are in a pandemic. And you get extra people on to make sure that we’re winning and then it’s difficult to isolate.

Under one in five (17%) managers reported changes to their organisation’s performance management systems or to employee targets, generally the temporary suspension of performance management goals. At DistributionCo, recognising the vulnerability of warehouse workers, representatives helped to develop an agreed way of *picking* (selecting goods for orders) that reduced dependence on targets:

One of the various things we’ve said is, “Look, you can’t be looking to people for optimisation—you’ve got a percentage to pick in an hour. You can throw all of that out the window because if you’re expecting people to social distance as best as they can while they’re doing the job, your pick rates and stuff, have got to go out the window. Because you can’t have people worrying about how many they’re picking in an hour, and also protecting themselves and others, by keeping themselves away from others while they do the job.”

6.3 | Addressing a culture of denial

One of the most important roles played by unions during COVID-19 was regulating the implementation of measures, including overcoming resistance or what one respondent called ‘a culture of denial’. This role could be seen as policing the workforce and as inducing tensions.

SeafoodCo appointed COVID marshals from outside OHS representative structures to monitor social distancing as the managers felt the existing representatives might feel compromised or reluctant to enforce measures. Previous scholarship has identified the frustration of HS representatives with workers' lack of interest in HS issues (Walters, 1983), reflected at PoultryCo sites where union representatives had to persuade workers to wear visors even when they were fogging up in low temperatures:

[We said], "If you don't think about you, think about the others." I know probably it wasn't the best response they were waiting for and obviously we weren't the best guys in this story, but at least it kept us safe. It was in their interest.

The survey indicated that, where migrant workers were employed, 72% said that the risk assessment considered the impact on them with 61% of these employers making the risk assessment available in languages other than English. However, of managers that reported their organisation had a COVID-19 risk assessment, the majority (62% in food retail, 53% in food manufacturing and distribution) said that it did not cover agency workers. At FoodCo most agency workers were migrants living in a close community and sharing houses and lifts to work. A union survey of workers at PoultryCo found that nearly two thirds shared accommodation with other workers. At Foodco the union advised on the risks of car-sharing. Representatives ensured workers wore PPE and provided reassurance:

You need to be communicating with everybody across the site regardless of whether they're in the union or not. Generally speaking, we quickly calmed a lot of fear and I can't begin to stress to you how fearful people were. It was a very, very anxious time. You can imagine dealing with something that is unknown and a lot of people really just do *want*—I don't know whether this is a comment on modern society—but a lot of people really do feel that *somebody* else has to come in and *save* them, if that makes sense. And that is sometimes the level of personal responsibility you are dealing with.

Union representatives translated personal responsibility into collective responsibility. A representative at SupplierCo stressed the importance of communication and that it took time for workers to adapt to new safety measures and to overcome habits. HS representatives at SupermarketCo persuaded warehouse workers to voluntarily wear face masks before they were required to do so and pushed for workers to be able to remove themselves from the shopfloor without repercussions if they felt at risk. Similarly, representatives at DistributionCo reported initial difficulties in persuading workers to wear face coverings, 'but to be perfectly honest, it's levelled out now and people are just doing it'. The union subsequently supported the organisation policy that those refusing to use visors would be sent home without pay. Elsewhere, a national union officer described the importance of doing daily floor walks and educating members without the fear of discipline:

So, it's understanding and getting management buy-in to say of people who are turning right when they should be turning left, "It's not a blatant abuse of the rules now, it's [just that] people are used to doing what they were doing." So it took some time to bed in, but it was about having those conversations with people rather than any potential disciplinary action. And it did take a little bit to bed-in in certain bits,

but I'm hearing now that it's just become the norm again the way that people move around sites.

In contrast, a respondent from FastfoodCo without union representation described 'a group culture of denial' fuelled by workers having to stay silent about safety and not able to voice concerns.

The case studies attest to both the value of union HS representatives at the level of the workplace and the potential for strengthening the union role. At DistributionCo, the representatives reported that 'the workforce have seen us more invaluable now than ever'. In three other case studies, there had been substantial recruitment with increasing numbers of workers contacting the union for advice and support, building a stronger bond with the membership.

COVID-19 was an issue that unions could work on with management, enhancing relationships and encouraging greater interactions. As one representative put it, 'They were *really, really* on board with us'. The legal status of HS representatives was emphasised, but managers also recognised the resources and expertise that they could bring, as expressed by the manager at DistributionCo:

I think the benefit that we get from the Unite representatives is their vast knowledge, or moreover, I suppose, the wealth of knowledge they can call upon. When we talk about union health and safety reps, they've got a myriad of contacts in our industry but [also] in different businesses and other industries. And I think this is where the union brings value, because they often do what the management team don't do, in that they bring in new ideas from outside. And for me, that kind of *breath of fresh air* approach that that brings with it new ideas, and I think certainly when we talk about Covid, from a Covid perspective that approach has been for me absolutely invaluable in the solutions that we've developed to help us deal with the pandemic.

A SupermarketCo manager stressed the role of representatives in engaging with the workforce with potential implications for longer-term union–management relationships:

Communicating—communication, *communication* is key in any crisis. And where the representatives have been really fantastic is—especially because they know what we will be looking at centrally, they would then cascade certain things down to their members, and down to people on the shopfloor filling shelves, or on the checkout for example and they could reassure the individuals that from a national point of view, things were being considered, contemplated and changed as well. So it isn't just a one way system from the company down to the union saying 'this is what we're doing'. Working with health and safety representatives from the union because they've really helped us engage, consult and drive the business forward in the right way.... it's endorsed from the top that we're trying to work together.

Such communications may be particularly important where workers do not have access to organisational email systems as at SeafoodCo. Similarly, the manager at DistributionCo felt that the ability of the union to communicate with the workforce was decisive through the daily briefing to union members via the union's WhatsApp group. A representative at FoodCo proposed that COVID-19 led to the reassertion of the union's role at the workplace:

We've learned our value again. That's where we need to be—political stuff is all very well and appearing on the telly is great but it's at the grass roots level that you have to make the membership matter.

Even in FastfoodCo, the presence of members attached to a union gave workers the confidence to speak out:

I feel safer when voicing my opinions on things and also, it's nice to know that it's not only me that feels this way about it, not just me who feels that the workplace has issues.

6.4 | Sick pay and absence

The case studies illustrated that sick pay and absence were key issues during the pandemic, influencing worker ability to shield or self-isolate and thus preventing infection. In the survey, 34% of managers reported changes to sick pay and 27% to attendance policies. Yet, the case-study interviews found that limited access to occupational sick pay and the low level of SSP discouraged those from self-isolating when they developed COVID-19 symptoms. Surviving on £95 SSP per week was not an option for workers, particularly those normally working 40–50 hours per week. Half of workers responding to the union survey in PoultryCo said they would not be able to afford to self-isolate if they tested positive. One worker only received SSP for a two-week self-isolation:

I can see why some people go into work because it's really difficult to live off sick pay that's not anything close to what you are used to earning.

The Union of Shop, Distributive and Allied Workers (USDAW) demanded that workers received company sick pay, but a national officer observed variations between employers. Some employers followed government guidelines and introduced SSP from day one of sickness, while others provided company sick pay or basic pay for those self-isolating. There were cases where workers were required to take annual leave. The union officer stressed that workers dependent on shift allowances and overtime could not survive on SSP and would continue working while switching off the government's track and trace app:

If you get things like shift allowance and overtime all built into that, and you are, say, a driver, a lot of them are on between £30,000 and £50,000 a year. If you were then to just go to statutory sick pay of £95 a week you're basically encouraging people to switch the app off and encouraging them to say "well, it's only a headache or it's only a slight cough, I'm coming into work because I can't afford to stay off."

At SupermarketCo, the union secured sick pay from day one rather than after three waiting days. Entitlement for those clinically vulnerable covered all incidences of sickness, including contractual pay for a first incident, company sick pay for a second, and SSP for further sickness. If employees ran out of SSP SupermarketCo paid the equivalent.

In contrast, representatives at PoultryCo reported that the organisation rejected union requests for full sick pay for those isolating. Two-thirds of respondents in a union survey

reported attending work when unwell and half were aware of a colleague who had done so. Three-quarters had not self-isolated when someone else in their household had symptoms. The union representatives at DistributionCo persuaded management that if workers were reliant on SSP when isolating, they would not stay off work. They made the case for basic pay when employees called in sick and that such absences should not be recorded for disciplinary purposes.

Union representatives at FoodCo campaigned for sick pay for agency workers on the basis that these workers could not afford to stay away from work if they had symptoms. Management responded that workers employed by a third party were not entitled to sick pay, while paying directly employed workers in full when they were self-isolating or waiting for tests. One of the representatives responded:

To say that you will almost allow a company that you deal with to discriminate against people or not support them adequately, but you expect them to come in ... with the potential that has to damage both the health of the site and your products' production processes and your ability to produce them. Surely it is worth you examining and looking at maybe dealing with another agency in order to protect everybody?

SeafoodCo introduced a COVID Leave of Absence Scheme that enabled those officially shielding or over 65 to remain absent from the workplace on 85% of full pay. The organisation had its own track and trace system and had isolated whole production lines. While sick pay entitlement varied with contractual status, where sick leave was taken for COVID-related reasons, it was paid from day one. The union representatives reported that SeafoodCo had become more relaxed about absence:

If you're off from last March up to now, there's no warnings, no verbals, nothing going on. It can be classed as COVID or not COVID but they've not put pressure on anybody.

The representatives at DistributionCo reported that the union had delivered full basic pay while workers were sick, which was considered instrumental by a general manager in encouraging those with symptoms to take time off:

This I think was a fundamental change to the way managers have managed any business— because we were actively encouraging people to take time off. If they had the slightest sniffle, anything at all, we would encourage people to take time off. We knew we would be undone if we had somebody coming into work who either knowingly or unknowingly had COVID but couldn't afford to be off.

7 | DISCUSSION

While COVID-19 is a function of global production, supply, migration, and transport networks, the workplace is a key site of infection and outbreaks reflect regulatory failure. The case studies represented large organisations that were key to supply chains and where continued production and distribution were essential but where social distancing was difficult in the face of demand. The survey attests to the importance of a sociological lens recognising that OHS is an outcome

of social relations within the workplace and the legitimisation of representatives able and willing to challenge managers. The survey found that workers were more likely to feel free to speak up where there was an HS representative—the deficit in FastfoodCo without union representation was clear.

The findings stress the need to foreground political economy. First, the legacy of deregulation is evident in the absence of an OHS infrastructure in most UK workplaces. The survey indicates only limited changes to representative structures in response to the pandemic. The case studies are not representative but demonstrate that formal structures provided the foundation for a more informal and immediate response at the workplace level based on the existence of trained and informed union representatives with access to wider resources. Second, the findings highlight the impact of Government migration policies on worker vulnerability. Migrant workers are often dependent on work permits from employers and are not in a position to challenge workplace risk. Third, the findings suggest the utility of Navarro's (1982) concept of the relative expropriation of health and its extension to recommodified labour in the UK, reflecting a legacy of cuts to sick pay, two-tier access, the introduction of 'waiting days' and disciplinary triggers. The deployment of temporary and agency workers for numerical flexibility under intensified supply chain pressures (Lever & Milbourne, 2017) was confirmed in the case-study organisations where agency workers were hired to meet fluctuated demands during the pandemic. The rise in non-standard contracts removes swathes of workers from the remit of employment protection. Episodic work creates confusion about entitlement. The case studies evidence that inadequate sick pay promoted workplace attendance in the face of infection. Agency workers, with limited or no access to SSP, may travel between workplaces and spread infection within and between workers and communities. The role of HS representatives in the case studies confirms Rubery et al.'s (2018) proposition that the decommodification of labour is a contested aspect of the employment relationship. The pandemic produced a push-back, which may or may not be sustained. While COVID is a pathogen, its spread is constructed, reproduced, and shaped by the social relations of production and thus becomes an arena for contestation and conflict (Taylor, 2021). The case studies show that collective organisation and trade union strength, particularly at the workplace level, are key factors in risk prevention. The success of one union in extending occupational sick pay to agency cleaners in London Underground indicates that, as in the case of Uber drivers, recommodification is not a one-way process. Nichol's (1997) structure of vulnerability is confirmed—union presence makes a difference, but the unitarist response preferred by UK employers in crisis persists.

8 | CONCLUSION

The findings confirm that an understanding of OHS requires multiple conceptual frameworks embracing organisational context, the labour process, and the social relations of work. They point to the significance of political economy, seen through the impact of deregulation of OHS in the UK, the contraction in state support for collective bargaining, migration policy, and diminishing access to occupational and SSP. In the context of a pandemic, all might be seen as an interconnected web, which, borrowing an image from Thomas Hardy, touched at one point causes trembling across the whole.¹

¹In *The Dynasts* (1886), Hardy likened society to '...one great network or tissue which quivers in every part when one point is shaken, like a spider's web if touched...'

While not representative, the case studies illustrate the agency of union HS representatives at the micro-level, something that is often elusive in the literature. Their embeddedness in the organisation of work and presence on the shopfloor was key in identifying and mitigating COVID-19 risk. The case studies confirm that OHS in the context of a pandemic has been contested and is a renewed arena for conflict in the terrain of industrial relations—most notably with the strike over worker safety at the DVLA in Swansea (BBC, 2022). The repoliticisation of OHS amid the pandemic and reassertion of union action on the issue may have contributed to growth in membership and generated participation and activism—not least demonstrated by the National Education Union's online meeting of 40,000 members that led to the closure of schools. The research underlines the legacy of deregulation that has left UK workplaces without adequate infrastructures to address current and future pandemics, raising questions as to their resilience in the face of climate emergency.

ACKNOWLEDGEMENTS

Our gratitude goes to the research participants and the Trade Union Congress, particularly Shelly Asquith, for their generous support of this project, as well as Professor Stephanie Tailby and Professor Philip Taylor for their valuable feedback. We would also like to thank the editor and reviewers for their constructive comments.

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REFERENCES

- Aday, S., & Aday, M. S. (2020). Impact of COVID-19 on the food supply chain. *Food Quality and Safety*, 4(4), 167–180.
- BBC. (2022, January 6). Union claims 110 Covid cases at DVLA Swansea in one week. *BBC News*. Retrieved June 8, 2022, from <https://www.bbc.com/news/uk-wales-59903252>
- Behling, F., & Harvey, M. (2015). The evolution of false self-employment in the British construction industry: A neo-Polanyian account of labour market formation. *Work, Employment and Society*, 29(6), 969–988.
- Brandl, B., & Bechter, B. (2019). The hybridization of national collective bargaining systems: The impact of the economic crisis on the transformation of collective bargaining in the European Union. *Economic and Industrial Democracy*, 40(3), 469–489.
- Bryson, A. (2016). Health and safety risks in Britain's workplaces: Where are they and who controls them? *Industrial Relations Journal*, 47(5–6), 547–566.
- Cai, M., Tindal, S., Tartanoglu Bennett, S., & Velu, J. (2021). 'It's like a war zone': Jay's Liminal experience of normal and extreme work in a UK supermarket during the COVID-19 pandemic. *Work, Employment and Society*, 35(2), 386–395.
- Caroli, E., Gautié, J., Lloyd, C., Lamanthe, A., & James, S. (2010). Delivering flexibility: Contrasting patterns in the French and the UK food processing industry. *British Journal of Industrial Relations*, 48(2), 284–309.
- Delahaie, N., & Perez, C. (2021). Workforce adjustment strategies and concession bargaining in times of crisis: A qualitative approach based on French case studies. *Industrial Relations Journal*, 52(5), 406–422.
- Dwyer, T. (1995). Industrial accidents: A sociological analysis. In C. Slappendel (Ed.), *Health and safety in New Zealand workplaces*. Dunmore Press.
- Fan, D., Zhu, C. J., Timming, A. R., Su, Y., Huang, X., & Lu, Y. (2020). Using the past to map out the future of occupational health and safety research: Where do we go from here? *The International Journal of Human Resource Management*, 31(1), 90–127.
- Fenn, P., & Ashby, S. (2004). Workplace risk, establishment size and union density. *British Journal of Industrial Relations*, 42(3), 461–480.

- Frick, K. (2011). Worker influence on voluntary OHS management systems—A review of its ends and means. *Safety Science*, 49(7), 974–987.
- Gray, G. C. (2009). The responsabilization strategy of health and safety: Neo-liberalism and the reconfiguration of individual responsibility for risk. *The British Journal of Criminology*, 49(3), 326–342.
- Greer, I. (2016). Welfare reform, precarity and the re-commodification of labour. *Work, Employment and Society*, 30(1), 162–173.
- Harvey, M. (2021). The political economy of health: Revisiting its Marxian origins to address 21st-century health inequalities. *American Journal of Public Health*, 111(2), 293–300.
- HSE. (2021). *RIDDOR reporting of COVID-19*. <https://www.hse.gov.uk/coronavirus/riddor/index.htm>
- James, P. (2009). Worker representation and health and safety: Reflections on the past, present and future. In D. Walters & T. Nichols (Eds.), *Workplace health and safety: International perspectives on worker representation*. Palgrave Macmillan.
- James, P. (Ed.). (2021). *HSE and Covid at work: A case of regulatory failure*. The Institution of Employment Rights. Retrieved July 22, 2021, from <https://www.ier.org.uk/product/hse-and-covid-at-work-a-case-of-regulatory-failure/>
- James, P., & Kyprianou, A. (2000). Safety representatives and committees in the NHS: A healthy situation? *Industrial Relations Journal*, 31(1), 50–61.
- James, P., & Walters, D. (2019). Health & safety at work: Time for change. *Institute of Employment Rights Journal*, 2(1), 58–85.
- Katta, S., Badger, A., Graham, M., Howson, K., Ustek-Spilda, F., & Bertolini, A. (2020). (Dis)embeddedness and (de)commodification: COVID-19, Uber, and the unravelling logics of the gig economy. *Dialogues in Human Geography*, 10(2), 203–207.
- King, N. (2012). Doing template analysis. In G. Symon & C. Cassell (Eds.), *Qualitative organizational research: Core methods and current challenges* (pp. 426–450). Sage.
- Lan, F.-Y., Suharlim, C., Kales, S. N., & Yang, J. (2021). Association between SARS-CoV-2 infection, exposure risk and mental health among a cohort of essential retail workers in the USA. *Occupational and Environmental Medicine*, 78(4), 237–243.
- Le, A. B., Wong, S.-W., Lin, H.-C., & Smith, T. D. (2021). The association between union membership and perceptions of safety climate among US adult workers. *Safety Science*, 133, 105024.
- Lever, J., & Milbourne, P. (2017). The structural invisibility of outsiders: The role of migrant labour in the meat-processing industry. *Sociology*, 51(2), 306–322.
- Lloyd, C., & James, S. (2008). Too much pressure? Retailer power and occupational health and safety in the food processing industry. *Work, Employment and Society*, 22(4), 713–730.
- Loudoun, R., & Walters, D. (2009). Trade Union strategies to support representation on health and safety in Australia and the UK: Integration or isolation? In D. Walters & T. Nichols (Eds.), *Workplace health and safety: International perspectives on worker representation* (pp. 177–200). Palgrave Macmillan.
- López-Andreu, M. (2019). Neoliberal trends in collective bargaining and employment regulation in Spain, Italy and the UK: From institutional forms to institutional outcomes. *European Journal of Industrial Relations*, 25(4), 309–325.
- Martin, A. (2020). *Unreported deaths—A PIRC Sector briefing: Food production*. Pensions and Investment Research Consultants. https://www.pirc.co.uk/wp-content/uploads/2020/09/PIRC_sector_food_processing.pdf
- Middleton, J., Reintjes, R., & Lopes, H. (2020). Meat plants—A new front line in the covid-19 pandemic. *BMJ*, 370, m2716.
- Moore, S., Tailby, S., Antunes, B., & Newsome, K. (2018). Fits and fancies: The Taylor Review, the construction of preference and labour market segmentation. *Industrial Relations Journal*, 49 (5–6), 403–419.
- Navarro, V. (1982). The labor process and health: A historical materialist interpretation. *International Journal of Health Services*, 12(1), 5–29.
- Navarro, V. (1983). The determinants of social policy a case study: Regulating health and safety at the workplace in Sweden. *International Journal of Health Services*, 13(4), 517–561.
- Nichols, T. (1997). *The sociology of industrial injury*. Mansell.
- Nichols, T., & Walters, D. (2009). Worker representation on health and safety in the UK — Problems with the preferred model and beyond. In D. Walters & T. Nichols (eds.), *Workplace health and safety: International perspectives on worker representation* (pp. 19–30). Palgrave Macmillan.

- Nichols, T., & Walters, D. (2016). *Safety or profit? International studies in governance, change and the work environment*. Routledge.
- Nichols, T., Walters, D., & Tasiran, A. C. (2007). Trade unions, institutional mediation and industrial safety: Evidence from the UK. *Journal of Industrial Relations*, 49(2), 211–225.
- Ollé-Espluga, L., Vergara-Duarte, M., Belvis, F., Menéndez-Fuster, M., Jódar, P., & Benach, J. (2015). What is the impact on occupational health and safety when workers know they have safety representatives? *Safety Science*, 74, 55–58.
- Polanyi, K. (2002). *The great transformation: The political and economic origins of our time*. Beacon Press.
- Robinson, A. M., & Smallman, C. (2013). Workplace injury and voice: A comparison of management and union perceptions. *Work, Employment and Society*, 27(4), 674–693.
- Roche, W. K., & Teague, P. (2015). Antecedents of concession bargaining in the great recession: Evidence from Ireland. *Industrial Relations Journal*, 46(5–6), 434–445.
- Rosewarne, S. (2010). Globalisation and the commodification of labour: Temporary labour migration. *The Economic and Labour Relations Review*, 20(2), 99–110.
- Rubery, J., Grimshaw, D., Keizer, A., & Johnson, M. (2018). Challenges and contradictions in the ‘normalising’ of precarious work. *Work, Employment and Society*, 32(3), 509–527.
- Sheehy, N. P., & Chapman, A. J. (1987). Industrial accidents. In C. L. Cooper & I. T. Robertson (Eds.), *International review of industrial and organizational psychology* (pp. 201–277). Wiley.
- Taylor, P. (2021). ‘The petri dish and Russian roulette’: Working in UK contact centres during the COVID-19 pandemic. *Work in the Global Economy*, 1, 185–208.
- Thompson, P., Newsome, K., & Commander, J. (2013). ‘Good when they want to be’: Migrant workers in the supermarket supply chain. *Human Resource Management Journal*, 23(2), 129–143.
- UK Government. (2020). Critical workers who can access schools or educational settings, GOV.UK, [online] Available at: (Accessed 23 September 2020).
- Walters, D., & Nichols, T. (2007). *Worker representation and workplace health and safety*. Springer.
- Walters, D., & Nichols, T. (2009). *Workplace health and safety: International perspectives on worker representation*. Palgrave Macmillan.
- Walters, V. (1983). Occupational health and safety legislation in Ontario: An analysis of its origins and content. *Canadian Review of Sociology/Revue Canadienne de Sociologie*, 20(4), 413–434.
- Wang, W., Cook, M., & Seifert, R. (2021). Foreign ownership and job insecurity during the recession: The moderating effect of union density in the UK. *Economic and Industrial Democracy*, 42(3), 785–804.
- van Wanrooy, B., Bewley, H., Bryson, A., Forth, J., Freeth, S., Stokes, L., & Wood, S. (2013). *Employment relations in the shadow of recession: Findings from the 2011 workplace employment relations study*. Macmillan International Higher Education.
- Watterson, A. (2020). COVID-19 in the UK and occupational health and safety: Predictable not inevitable failures by government, and trade union and nongovernmental organization responses. *NEW SOLUTIONS: A Journal of Environmental and Occupational Health Policy*, 30(2), 86–94.
- Zohar, D. (2010). Thirty years of safety climate research: Reflections and future directions. *Accident Analysis & Prevention*, 42(5), 1517–1522.

How to cite this article: Cai, M., Moore, S., Ball, C., Flynn, M., & Mulkearn, K. (2022). The role of union health and safety representatives during the COVID-19 pandemic: A case study of the UK food processing, distribution, and retail sectors. *Industrial Relations Journal*, 53, 390–407. <https://doi.org/10.1111/irj.12377>