

## MEETING MINUTES

### The 5th meeting of the Task Group on Occupational Safety and Health (TG OSH) of the NDPHS. Helsinki, Finland, 16 May 2013.

#### List of participants

No.	Name	Position	Institution	Country
1.	Dr Mari Järvelaid	Head of Bureau	Bureau of Occupational Health	Estonia
2.	Ms Ester Rünkla	Analyst	Ministry of Social Affairs	Estonia
3.	Mr Wiking Husberg	Ministerial Adviser	Ministry of Social Affairs and Health (TG OSH Chair)	Finland
4.	Ms Elina Kaseva	Senior Officer	Ministry of Social Affairs and Health	Finland
5.	Ms Suvi Lehtinen	Chief, International Affairs	FIOH	Finland
6.	Dr Kari Kurppa	Leading expert	FIOH	Finland
7.	Mrs Mirkka Salmensaari	Information Officer	FIOH	Finland
8.	Dr Ivars Vanadzins	Director	Institute of Occupational Safety and Environmental Health of Riga Stradins University	Latvia
9.	Dr Elizabet Paunovic	Program Manager	WHO European Centre for Environment and Health	
10.	Dr Yogindra Samant (via video link until 12)	Chief Medical Officer	Directorate of Labour Inspection	Norway

#### 1. Starting at 10.15.

Introduction of participants. A glance at the meeting agenda.

#### 2. NDPHS issues

Mr. Husberg told that current TG OSH members have been updated to NDPHS TG OSH website. Russia does not have a formal member, but has an informal member in St. Petersburg. Sweden does not have a formal member either. Dr. Samant will contact his superior and Norway will inform their member(s) after this. Information about ILO's member(s) is outdated since they have not decided on a new representative yet.

Mr. Husberg told about the evaluation of the NDPHS. When the evaluation is done, the NDPHS organization will be looked again. It could be that OSH Task Group becomes an Expert Group, since OSH is not a short term task but long term work.

#### 3. TG OSH Part 3: Health at Work - Occupational accident registration

Mr. Husberg opened this point by mentioning that member states seem to have an interest towards occupational accident registration and its problems and challenges. In the previous meeting in St. Petersburg good steps concerning this issue were made.

b) Dr. Kurppa gave a presentation on numbers and rates of fatal and non-fatal occupational accidents. The presentation was based on the draft document Work-injury rates in Europe as provided by national authorities to the ILO yearbook of labour statistics. The document can be found in the website of this meeting. Dr. Kurppa stated that comparison between countries is difficult and underreporting of the accidents is a significant problem in many European countries. In Western Europe accident rates are higher than in Eastern Europe which refers to bigger underreporting problem in Eastern Europe. In those Western European countries where there are no insurance-based reporting systems but a universal social security coverage, accident rates are much lower than in countries with an insurance-based reporting system.

It was discussed that there cannot be reasonable monitoring of occupational accidents in countries where for example 80 per cent of accidents are not registered. It was also mentioned by Dr. Kurppa and Dr. Samant that even fatal accidents are not as well registered as thought, since for example in agriculture fatal accidents on public roads can be registered as traffic accidents, not occupational accidents. In spite of this, fatal accidents are still the most reliable.

It was pointed out that in many countries, according to labour force or working conditions surveys there are much more occupational accidents than what statistics indicate.

c) Dr. Samant told about his upcoming survey of fatal occupational injuries caused by accidents in the BSN countries. The question form of the survey is in the website of the meeting. The survey would be rather similar to the survey regarding occupational health services. The purpose of the survey is to investigate for example how countries define occupational accidents and fatality, are they including commuting accidents or not and how countries report their statistics on occupational accidents to EU.

Mr. Husberg suggested that it would be good to find links between occupational accidents and existing national strategies which include the target to reduce occupational accident as an argument stating the importance of this matter. In the future the focus of occupational safety should be more on SMEs, since it has been a so called black area so far. Mr. Husberg asked if zero accidents approach and the methods of companies committed to this approach could be added to Dr. Samant's survey or could this be the next step. Dr. Samant suggested that it would be better to do the survey first and think about the following steps according to the findings of the survey.

Dr. Kurppa suggested that it would be useful to add to Dr. Samant's survey a question about what accidents can be compensated. It was also discussed that it is a valid point whether certain fatalities at work are registered as occupational accidents, for example a fatality of a kiosk seller in consequence of a robbery or a fatality of a bus driver in consequence of a passenger attacking the driver. Because there are differences in defining occupational accidents, definitions are useful and needed.

a) Dr. Vanadzins reported about a small survey carried out in hospital in Latvia by two master's students. The purpose was to investigate which injuries were work-related and had an occupational effect in order to find out if there is a problem in registering the occupational accidents. According to the survey there are problems. The survey was based on case documents and interviewing nurses.

Dr. Paunovic told that the WHO health info database do not register occupational accidents anymore since they are focusing on other issues such as suicides. Also a common and uniform diagnostic criterion concerning occupational accidents and diseases should be agreed so that the comparison would be more reliable. It is difficult to state which accidents or diseases are work-related and occupational. These issues are hard to bring out since occupational health issues are not a high priority in the health ministries at the moment.

Mr. Husberg suggested that about the issues discussed, a smaller group would draft a two page summary paper based on the paper that Dr. Kurppa has already drafted. The idea is to raise fairly clearly the points that the facts available indicate, no in-depth scientific argumentation. It would be useful to refer to national strategies which contain objectives about occupational accidents. The paper should raise the finding of the three different groups (two from Western Europe, one from Eastern Europe) from reading official statistics and that small surveys strengthen the view of underreporting being a severe problem. It was decided that Mr. Husberg, Ms. Lehtinen and Dr. Samant will draft the paper and Dr. Kurppa and Dr. Vanadzins will add calculations from ILO and EUROSTAT.

First draft of the paper will be sent for comments by 30 June 2013 for the people that were present in this TG OSH meeting and after this to other people involved with TG OSH. Deadline for the finished paper is the NDPHS EG&ITA meeting, which is on 4<sup>th</sup> of September. Mr. Husberg will contact the Secretariat and introduce the idea of this paper. With the Secretariat he will discuss about the possibility to present the paper in the PAC meeting 21-22 November 2013.

#### **4. Development of policy paper "Healthy Lifestyles in Healthy Workplaces"**

Dr. Paunovic presented the current situation of preparation of NDPHS Policy Paper "Healthy Lifestyles in Healthy Workplaces". The project proposal is being developed and jointly coordinated by WHO European Center for Environment and Health and the Department of Medical Sciences, Occupational and Environmental Medicine, University of Uppsala, Sweden. The contact person in University of Uppsala is Prof. Peter Westerholm. The purpose is to do a descriptive study, then a field study and the main goal is to draft a policy paper. The draft memorandum of project proposal will be updated to the TG OSH 5 meeting website to other post-event documentation by Dr. Paunovic.

Dr. Paunovic wanted to clarify which countries are committed to the project, which type of document the policy paper should be and what are the essential topics of the project. Countries known to be interested are Estonia, Finland, Latvia and Sweden and based on the previous meeting in St. Petersburg also Poland. Mrs. Salmensaari will send Dr. Paunovic a list of contact people of the countries and will check Poland's interest and contact person. Ms. Lehtinen suggested the policy paper to be a framework for the continuous work that countries do for Healthy Lifestyles in Healthy Workplaces. The paper needs to be something that member countries can refer to. Mr. Husberg mentioned that for the ministerial level the policy paper needs to link to Health at Work Strategy and it should contain clear items.

Everyone in the meeting agreed that the suggested topics of the project proposal were all very crucial. Ms. Lehtinen pointed out that management of long-term sick leave absence should also include activities to return to work and the idea of shortening sick leaves. This point of view could be included to the first topic in the list if it was renamed. This way the topic could also contain the idea and target of many countries of longer working careers.

Also Mr. Husberg and Dr. Vanadzins raised the issue of prolonging working careers and the ageing issue in general. Mr. Husberg stressed that it is important to remember the focus being work and workplaces. Dr. Järvelaid agreed that all the topics listed are important and crucial. She especially stressed the importance of the topic Alcohol and drug usage – there are already two institutes dealing with those issues in Estonia. She also stated that actually the first topic Management of long-term sick leave absence together with the idea that Ms. Lehtinen added, could also work as a main topic and the other points as sub-topics. To sum up Dr. Paunovic suggested that the idea in focus could be for example health through working life course.

## **5. Evaluation of NDPHS “Health at Work” Strategy 2014**

Mr. Husberg presented an evaluation table of the Strategy, which is updated once a year in the joint meeting held of TG OSH and BSN. The table has been a good tool to follow the progress concerning items in the strategy.

In 2011 Secretariat sent a questionnaire on how the strategy has been implemented. That is a first official follow-up of the strategy. First the strategy was for years 2008-2011, but it has been extended for years 2012-2013. Mr. Husberg asked whether the strategy should be extended as such, updated or forgotten. Ms. Lehtinen brought up that in a way member countries should have done a lot in six years, but then again OSH issues normally take more time than that. She proposed that after a strong midterm evaluation the strategy could be extended to for example year 2020. Dr. Vanadzins brought up that since EU strategy has run out and the new one for years 2014-2020 has not yet been seen, regional strategy is needed. Mr. Husberg summed up the discussion that the strategy is useful and it has to be tried to extend, since OSH issues need a long time span to be achieved. OSH issues need to be lifted up. Ms. Lehtinen suggested that a uniform template should be sent to ministries when the impact and future of the strategy is inquired. This way the reporting is more uniform. The questionnaire template should be sent to ministries early in the year 2014. The issue will be discussed in the BSN Annual meeting 19-20 Nov 2013.

### **Funding opportunities**

Mrs. Salmensaari and Ms. Lehtinen participated in the Central Baltic meeting in Helsinki on 8<sup>th</sup> of May. The Central Baltic Programme is at the moment preparing for the period 2014-2020. The aim of the meeting and its thematic workshops was to collect ideas and proposals for potential projects and funding. The focus of the programme will be on areas of environment, transport, SME development, and education. The funding can only be applied by Estonia, Finland, Latvia and Sweden and only for the year 2015. The proportion of funding for other countries participating should be applied elsewhere, but this can also be an advantage when applying Central Baltic Programme funding. OSH issues could link to themes of education and SMEs. Dr. Vanadzins suggested that a possible theme could be to link zero accident thinking to life-long learning and SMEs, which could further link to productivity. Ms. Lehtinen suggested that in order to show the larger interest of different countries, all possible countries could apply for funding. Funding can be applied not before Autumn 2014 according to Ulari Alamets, but the themes may be sent to the Central Baltic secretariat already during Summer 2013.

Mr. Husberg told that he had been talking with his colleague Mr. Hannu Stålhammar who has been working on the European Social Fund (ESF). The next ESF Operational Programme has a link to OSH issues and it could include regional operations, which means that NDPHS TG OSH could apply funding through ESF Programme. Mr. Husberg had also

got a message concerning funding opportunity from the NDPHS Secretariat in the morning of the meeting. The document has been uploaded to the meeting website.

## **6. Future plans**

On 19-20 November, the 19<sup>th</sup> Annual Meeting of BSN on Occupational Health and Safety will be held in Helsinki, Finland. TG OSH will also take part in this meeting. On 21 November there will be the Ministerial-level NDPHS PAC side-event and 22 November the Ministerial-level NDPHS Partnership Annual Conference.

Ms. Lehtinen brought up the two conferences organized by FIOH in Helsinki coming Autumn: Work, Wellbeing and Wealth: Active Ageing at Work on 26-28 August and International Symposium on Culture of Prevention - Future Approaches on 25-27 September.

The meeting was closed at 14.45.