



Bilbao 9-11 November 2018

MINUTES

Meeting: 9-11 November 2018

Visit to the European Agency for Safety and Health at Work (the 9th, Friday, 9:00-13:00) Santiago de Compostela 12, 5th floor

The Section has partnered to the previous (Healthy workplaces for all ages) and the current EU-OSHA “Healthy Workplaces” Campaigns. In order to get a better insight and enrich our co-operation we were invited to hold our meeting in Bilbao where EU-OSHA is headquartered.

1. Welcomes

The participants were greeted by Tim Tregenza, who is responsible for networking activities within the Agency. We are grateful the Agency for hosting, the Spanish OM Organization President, Dr. Apellaniz, for organising and the new EASOM Board president for joining the meeting.

2. Participants and apologies

PARTICIPANTS:

Alenka Škerjanc, president (Slovenia), Klaus Ernst Stadtmüller (Switzerland), Simon Bulterys, treasurer (Belgium), Kari Reijula (Finland), Theodore Bazas (Greece), Thomas Kraus (Germany), Jelena Macan (Croatia), Milan Tuček (Czech Republic), Ferenc Kudász, secretary (Hungary), Maja Eglīte (Latvia), Nicole Majery and Marc Jacoby (Luxemburg), Pedro Gustavo Reis (Portugal), Emil Vancu (Romania), Elena Pauncu (Romania), Davor Romih (Slovenia), Nerys Williams (United Kingdom).

Guests: Alfonso Apellaniz González (SEMST), Begoña Martínez Jarreta (EASOM), Johannes Kallio (EJD), Janne Julie Møller (Denmark, specialist trainee)

APOLOGIES: Karl Hochgatterer and Georg Wultsch (Austria), Ole Carstensen (Denmark), Satu Väihkönen (Finland), Orfanidis Moysis (Greece), Tom O'Connell (Ireland), Károly Cseh (Hungary), Fabriziomaria Gobba and Ivo Iavicoli (Italy), Marek Varga (Slovakia), Jolanta Walusiak Skroupa (Poland), Milan Milošević (Croatia), Marie Cruz Rodriguez Jareño and Pedro Gonzales de Castro (Spain), Dick Spreeuwers (The Netherlands), Tor Erik Danielsen and Kristian Vetlesen (Norway), Bernard Maillet (UEMS Central).

3. Welcome and presentation from EU-OSHA

The introduction from each participant was followed by a brief safety announcement, which is traditional at the Agency. In the first presentation Tim Tregenza outlined how EU-OSHA is positioned in the European Union occupational safety and health (OSH) system: highlighting their task of collecting, analysing and disseminating information. Emphasis is on a strong network: from one part the national Focal points (in each Member State) and on the other the European stakeholders, like UEMS-OM. Relationships to social partners, the European Commission and experts groups thereof were explained. The Agency's six strategic objectives and six priority areas were presented. An interesting point was the ESENER survey finding: employers' most important driver in OSH investments is the legal obligation and the reason

for not investing is the sense that they have no such problems. (See *Annex 1* – printed version was provided at the meeting)

4. *Presentation of UEMS-OM*

The UEMS structure and the place of the OM Section within were presented. The main objectives of UEMS are focused on free movement of doctors and the harmonisation of specialist and continuous trainings. Currently the OM Section is developing the European exam, analyses new challenges and investigates quality criteria. She emphasised that occupational diseases have varying criteria through the EU, while non-occupational diseases are treated according to general standards. Furthermore, occupational health care is not set by European directives. She concluded that the Section is committed to multidisciplinary approach. (See *Annex 2*)

5. *Presentation of the Healthy Workplaces Campaigns (HWC)*

HWCs are the most visible part of EU-OSHA activities. Elke Schneider, senior project manager presented the current Campaign (on dangerous substances). The Agency relies on its partners (from industry to experts) to reach the widest audience. The reason for the current topic is that occupational exposure to dangerous substances causes ~10 times more fatalities than accidents at work. She detailed the five strategic objectives of the Campaign and introduced the functionalities of the dedicated website. (See *Annex 3* – printed version was provided at the meeting)

Katalin Sas, project manager for one of the projects of the OSH overview on musculoskeletal disorders (MSDs) – ‘Review of research, policy and practice on prevention of work-related MSDs’ gave a presentation on EU-OSHA activities on MSDs and reminded that it is a recurring theme in HWCs. Despite all the efforts their prevalence is growing and they are a substantial source of disability. The above project will seek answers why past policies and programmes were ineffective. E.g. psychosocial factors could be important. The OSH overview on MSDs will be followed by a Campaign on the topic, starting in 2020. (See *Annex 4* – printed version was provided at the meeting)

6. *Exploring synergies*

The presentations were followed by intense discussions. It was raised that in many countries doctors were dependant of the employers. On the other hand there is no EU legislation on prevention services at all. Fertility and reprotoxins are sensitive but very important topics. EU-OSHA and UEMS-OM are similar in that both stress the importance of, and raise awareness on occupational safety and health. It was agreed that (non-occupational) physicians should learn more about exposures at work. Modern media and even games could be used to reach a wider audience.

The Agency will publish a report on work-related diseases alert and sentinel systems in December. The responsible project manager (Emmanuelle Brun) could be invited to the next Section meeting. Despite the free movement of labour the list of occupational diseases is not harmonised on a European level. Occupational diseases are recognised at national level, which has social and financial features. Research should be uncoupled from compensation issues because prevention is hindered by lack of knowledge. Sadly, the human biomonitoring EU project contains little occupational elements. Expert from the OccWatch project could be invited to Section meetings, likewise other EU-wide expert networks could provide synergies too.

Section members could participate at Agency meetings as experts, interviewees, and provide input for the Agency newsletter. The Agency will receive the minutes of the Section meetings

and could join the meetings.

UEMS members representatives could be involved in the qualitative research (focus groups and interviews) to be carried out as part of the project 'Review of research, policy and practice on prevention of work-related MSDs'.

Section meeting (14:00-17:00)

After the lunch break, which was used for further discussion, the Section meeting started, without Agency representatives.

7. *Minutes of the last meeting (Oslo)*

The finalised draft was accepted. (See *Annex 5*)

8. *Reports from meetings*

EASOM meeting focused on risk in agriculture with farm visit. The International Conference of the International Ergonomics Association featured several (occupational) medical aspects, the proceedings are available.

9. *Information from UEMS Central*

The President briefly informed on the last Council Meeting. The Secretary General is optimistic about the future. Tasks and administration is growing. Money for the work done is starting to arrive. Expenses due to ETRs are to be covered by the Sections. The EU directive on professional training will harmonise not only the length but also the content of medical speciality trainings.

10. *Section finances*

It was confirmed that most membership fee was paid and the actual balance of the Section was OK. The entire UEMS dispose over 4 million Euros so stricter rules apply to all. One reason for the administration fee is that under Belgian law VAT has to be paid but cannot be reclaimed. The Council reached the following consensus: Sections pay 8% of their incomes. (see *Annex 6*)

11. *The Statement on occupational diseases*

UEMS Brussels Board considered the paper too technical. The statement should focus on one clear goal that we want to achieve within UEMS. The paper will be further discussed by the working group and the original leader of the group (the Representative of The Netherlands) is asked to revise the original goal and the desired fate, with inputs from the group. Deadline: ready for the spring UEMS Council meeting.

12. *Surveys*

The survey on the role of Specialists in OM and of non-OM specialists in European countries was presented by the Greek representative. Three models were identified: (i) only trained specialist and "competent" doctors; (ii) anyone found competent by the employer; (iii) any doctor by law. Feedback is requested from any delegate who wishes to further clarify his/her country profile.

Furthermore, attention was drawn to a recent Greek Ministerial Decree which, in all circumstances, allows physicians holding specialties other than occupational medicine to practice OM on a par with specialists in OM, whereas the former vastly outnumber the latter, and to an impending High Court Decision which may allow several more hundreds of such non OM specialists to do the same. Greece put the question as to whether there was a consensus for the following common Statement, which might help to prevent OM from

deteriorating in Greece, to be made by the Section: “In European countries, a physician who does not hold and is not fully qualified in the Specialty in (OM) must not be allowed to practice the whole spectrum of OM on a par with specialists in OM, i.e. to execute all OM tasks in all circumstances, regardless of the magnitude of the occupational health risks, i.e. the type of work and type and size of enterprise”. Some delegates did not approve the statement claiming that such a statement was not compatible with their view on multidisciplinary. Furthermore it was considered to be a national issue. (See *Annex 7*)

13. Forming new working groups

Following brief introduction WGs had separate discussions and provided initial results. Due to absences WG3 was not active.

WG1

The WG has set out the roadmap to have CESMA assessment. An archive of multiple-choice questions will be completed by the end of 2018. The plan will be presented to CESMA at their December meeting. The testing is due early 2019. (See *Annex 8*)

WG2

The WG agreed on the WG name (Actions for Advancing Occupational Medicine) and defined the general objectives of work. The first priority topic is “The role of the speciality of occupational medicine”, this refers to a specialist or “competent” doctor. (see *Annex 9*)

Ad-hoc group on the revision of the statement on occupational diseases

As one of UEMS’ core objective is CME the message should be about mainstreaming knowledge on occupational diseases among non-OM specialists. Compensation issues should be abandoned. There is a need for reliable data. OM focus should be on the relationship between exposures and the incidence of diseases to be able to set prevention priorities. The UK representative offered to do a shortened version of the text.

The Section meeting was closed at 17h.

In the evening our host accompanied us to restaurants where we could taste true Basque specialities.

Section meeting continued (10th Saturday, 8:30-10:45) Hotel Carlton, Plaza Federico Moyúa 2

14. Occupational medicine in the Basque country

Our host, the current President of the Spanish Occupational Health and Safety Association (SEMT) Dr. Alfonso Apellaniz González provided us insight to the Spanish and Basque system, with the help of Prof. Dr. Begoña Martínez Jarreta. The Spanish national system relies highly on legal requirements. OM training is four years. There are 4000 OM specialists for 15 million workers. However, every requirement could be fulfilled only by 14000. Meanwhile the number of trainees decreases (~100 annually). Some tasks could be transferred to non-specialists by doctors taking managerial/co-ordination roles. Most specialists work at prevention services and do what these ask from them. Recruitment is impeded by several communities and mutuas unwilling to finance the training because doctors may leave to private practice. It is felt politicians do not recognise the public health perspectives of occupational medicine.

15. Website

The information on the latest developments was presented. If the private user account option

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can be abandoned the cost would decrease to around 500 Euros/year. The Section unanimously agreed that it can be abandoned. New layout plans will be available with the new content management system. The Greek representative suggested sidebars/top tabs where country delegates and WGs would appear with participants. The new design will be discussed in detail when the new content management system will be functional.

The issue of acknowledging of individual delegates was raised. The Section voted on whether individuals should be named in Section documents. Should not: 11; should: 2; abstain: 1. Decision: Section documents (statements, WG papers) will be published without authors but under the name of the Section. If WG members develop their materials into scientific papers and publish them accordingly, everyone should be named properly as the author of such scientific paper.

16. *Co-operations*

Prof. Begoña Martinez Jarreta is the newly elected president of EASOM, which unites ~30 occupational medicine schools. She told that they were just reconsidering the possibilities for synergies an co-operation between the two associations. The presidents are mutually invited to meetings. It was agreed that OM needs academia and the EU exam works currently with EASOM collaboration.

An update on ETUI co-operation was given. Focus is on CMR (Dec/2018 Women and Cancer conference: <https://www.etui.org/Events/Conference-Women-Work-and-Cancer>). Best awarded publication: <https://www.etui.org/News/2018-Prescribe-Prize-awarded-to-an-ETUI-publication> (See also *Annex 10*).

The survey results made by the European Junior Doctors (EJD) were presented. Everyone must send the contact details for the national OM trainees' representative to the representative of EJD in our section. (see *Annex 11*)

Finally, this meeting showed how seriously the Section takes the co-operation with EU-OSHA. The HWC-related activities at home should be registered. Please keep on feeding in every event, publication, etc. to the spreadsheet and have it ready by the autumn of 2019. (see attached MS Excel sheet)

17. *Finalisation of the country information template*

Some remarks were received and a new version was distributed. It was agreed that the best was to pilot the second draft by all countries representatives filling it asap and sending to the Greek representative. Deadline: before next Section meeting. (see attached second draft)

18. *CME (and related) events*

- Respirable Silica – Health Surveillance and Exposure Control, Buxton, UK, 29/January/2019 (www.hsl.gov.uk)
- Challenges of Migrant Labour webinar, 14/02/2019 (<https://www.som.org.uk/civicrm/event/info%3Fid%3D185%26reset%3D1>)
- 59. Annual Scientific Conference of DGAUM, Erfurt, Germany, 20-22/March/2019 (www.dgaum.de/termine/jahrestagung)
- 35th National Construction Safety Days, Metz, France, 22-24/May/2019 (www.sistbtp-lorraine.fr)
- Occupational Health 2019 - research, practice, policy (incl. nautical theme), Bristol, UK, 17-19/June/2019
- EASOM Summer School – Occupational cancers, Latvia, (preliminary date: last weekend of August)
- XXXIV. International Congress of Occupational Medicine, Marianske Lazne (Marienbad),

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Czechia, 24-25/September/2019

- 7th Croatian Congress on Occupational Health, Pula, Croatia, 9-13/Oct/2019

Scientific conferences can be announced in the Oxford Journal: Occupational Medicine by the help of the UK representative. Everyone is invited to send her information six months ahead.

19. *Next meetings*

- 31/May-1/June 2019: Ponta Delgada, Açores (Portugal)
- 27-29/September 2019: Łodz (Poland).
- Spring 2020: Luxembourg, Luxembourg

20. *Any other business*

- It was agreed that the student writing master thesis on CMV among kindergarten teachers will be helped by forwarding the questions to countries concerned.
- The Society of Occupational Medicine published a paper: What could make difference to the mental health of UK doctors? A review of the scientific evidence (Available at: https://www.som.org.uk/sites/som.org.uk/files/What_could_make_a_difference_to_the_mental_health_of_UK_doctors_LTF_SOM.pdf)
- The Section Board (and the National Member Associations) received an invitation from UEMS Central to nominate delegates to a newly created MJC Infection Control. As the costs belong to the Sections themselves we cannot afford the high expenses.
- European Commission public consultation relating to offshore safety. (https://ec.europa.eu/info/consultations/public-consultation-on-the-evaluation-of-the-offshore-safety-directive_en)
- Published after the meeting: European Medical Organisations' Statement on Supporting Vaccination (Available at: <http://doc.cpme.eu:591/adopted/2018/cpme.2018-081.Vaccination.Statement.FINAL.pdf>)

21. *End of meeting and Gala dinner*

The meeting closed at 10:45

Our host SEMST hired a guide making a very informative and exhaustive city tour where we could understand the history, economy and culture of Bilbao.

The Section is grateful for the organisation and the hospitality.

Alenka Škerjanc
president

Ferenc Kudász
secretary