

Direction de la Santé - Division de la Santé au Travail

# Occupational Health in Luxembourg

Dr Robert Goerens

# Table of contents

- 1. Organisation
- 2. Actions of the Ministry of Health / OHS
- 3. Current weaknesses of OH
- 4. Some solutions
- 5. Questions/Anwers

# 1. Organisation

# Governance in occupational health and safety

**Ministry of Work and Employment** 

**Ministry of Health** 

Ministry of Social Security

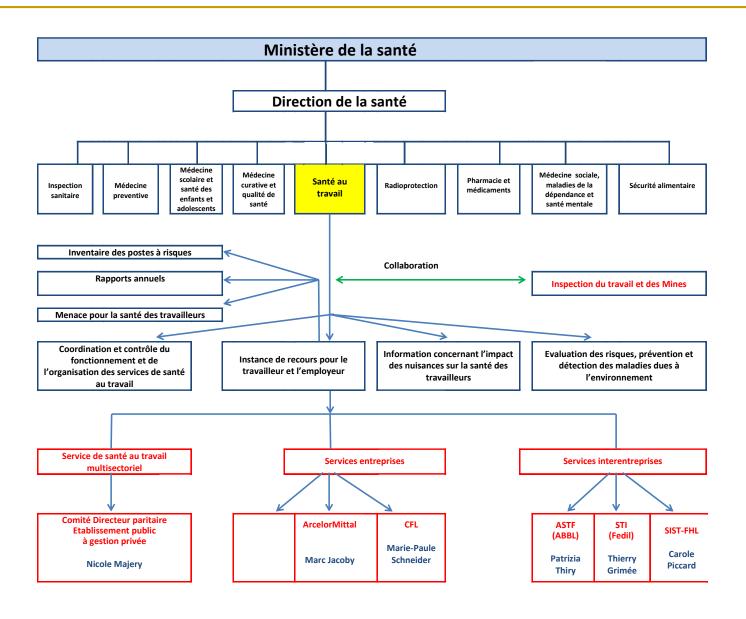
**Ministry of Civil Service** 

Labor inspectorate (ITM)
Employment administration (ADEM)

Division of Occupational Health

Insurance association (AAA) National Health services (CNS)

Division of safety and occupational health



### SOME FIGURES OF OCCUPATIONAL HEALTH I

### STM (Multi sectorial occupational health service)

- Number of surveillance of workers: 300 000
- Number of medical consultations and medical advices in 2019: 72 760
- Number of OH physicians: 49 (41 fulltime equivalent)
- Number of nurses: 25 (21 fulltime equivalent)
- Number of ergonomist: 3
- Number of physiotherapist: 3
- Number of psychologist: 3

#### STI

- Number of surveillance workers: 63 000
- Number of medical consultations and medical advices in 2019: 29 744
- Number of OH physicians: 8
- Number of nurses: 4
- Number of ergonomists: 1
- Number of psychologists: 1

### SOME FIGURES OF OCCUPATIONAL HEALTH II

### ASTF (Multi sectorial occupational health service)

- Number of surveillance of workers: 53 000
- Number of medical consultations and medical advices in 2019: 23 587
- Number of OH physicians: 5
- Number of nurses: 2
- Number of ergonomists: 1
- Number of psychologists: 3

#### Arcelor Mittal

- Number of surveillance of workers: 3 000
- Number of medical consultations and medical advices in 2019: 2 295
- Number of OH physicians: 3
- Number of nurses: 2
- Number of ergonomists: 1
- Number of psychologists: 1

### MISSIONS OF THE OCCUPATIONAL HEALTH SERVICES

#### Essentially preventive in nature

- 1. identify risks
- monitor work environment factors
- 3. give advice on workstation planning
- 4. promote the adaptation of work to humans
- 5. monitor health
- 6. provide advice to the employer and employee in the areas of hygiene, ergonomics, health education and professional rehabilitation
- 7. cooperate with the health and safety committee
- Organise first aid

### MEDICAL EXAMINATIONS I

#### Employment

- Before employment if risky health position
- After employment for all other employees

#### Periodic reviews

- Age under 21
- Exposed at a risky health position
- Control the employment examination
- Night workers

#### Sporadic examinations

 at the request of the worker, the employer, the joint committee or the delegation, the occupational health physician

### **MEDICAL EXAMINATIONS II**

- Examinations after absence of more than six weeks
  - □ The employer is required to notify the OHP
- Examinations during a change of workstation with significantly different working conditions
  - □ The employer is required to notify the OHP

# Medical examinations provided for certain categories of workers

- Young workers
- Pregnant women
- Disabled workers
- Workers with reduced working capacity (professional reclassification)

### Professional reclassification

- The purpose of reclassification is to facilitate the professional reintegration of the employee who has been on long term sick-leaf or declared unfit by the OHP
  - To benefit, the worker has to justify a seniority of at least three years in his last job and a fitness at the employment
- The employee can be reclassified internally or externally by the mixed commission
  - Internally: to another position or to another workplace adapted to their residual capacities
  - Externally: right to unemployment benefit in Luxembourg
- Referral to the Mixed Commission by two bodies
  - Social security medical check: orientation to the competent OHP; if unfit: referral to the mixed commission
  - Competent occupational health physician; if unfit and companies more than 25 employees: referral to the mixed commission
- Some statistics 2019
  - Internal reclassification: 1021 External reclassification: 791

### Definition of risk workplace

#### Position exposing the worker to risks

- Occupational disease
- Specific occupational accidents
- Physical, biological and carcinogenic agents

#### Workers at

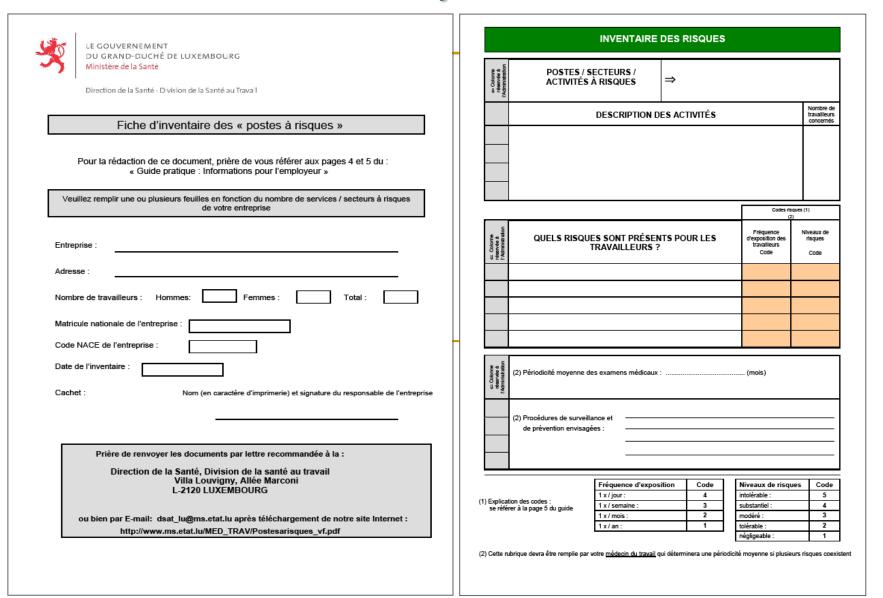
- Safety post
- Control of an installation where the failure could endanger the life of other workers or third parties

#### Night work

#### Not part of the definition

Stress, bullying, physical violence

### Model: Risk item inventory form





# Some actions of the Ministry of Health

- Training and information sessions of designated workers and staff representatives
- Participation in national campaigns and information, brochures on occupational health and safety
- Disease prevention and health promotion in the workplace through the National Health Plans of the Ministry of Health
- National back school
- Promotion of notable health and safety projects in companies through an health award

# Training and information on occupational health and safety

- Participation in training for designated workers
- Participation in training sessions for safety representatives
- Specific conference on various subjects and in particular
  - Psycho-social risks (stress, moral harassment, burn-out)
  - Alcohol and drugs in the workplace

# National campaigns and information material

- National Forum on Occupational Safety and Health in partnership with employers union (UEL) and labor inspectorate (ITM)
- Agricultural show
- Health and safety week in collaboration with the Bilbao European Agency for Safety and Health at work
- Participation and support of information brochures developed by the occupational health services

# National Health Plans: general

- As disease prevention and health promotion in the workplace become more and more important, most National Health Plans of the Ministry of Health have a specific component of actions to be carried out in the workplace
- Occupational health physicians in collaboration with employers and unions organisations are our partners in carrying out actions in the field

### National Health Plans I

#### National Cancer Plan

 Improvement of cancer prevention in the workplace by putting in partnership with the occupational health services

#### Drug Action Plan

- Training and information in companies
- Development of guides in relation to prevention strategies

#### GIMB: Promotion of healthy eating and physical activity

 Promote a balanced diet and regular and adapted physical activity and fight against the problem of obesity and sedentary lifestyle

#### National Rare Diseases Plan (PNMR)

 Help workers with a rare disease in the workplace by checking accessibility to the workplace, working conditions and psycho-social support

### National Health Plans II

#### National Action Plan for the reduction of radon concentrations

 Information and awareness-raising for companies and implementation of radon monitoring measures in the workplace

#### National Suicide Prevention Plan (PNPSL)

Specific actions at the workplace

#### National Tobacco Control Plan

Measures and actions at the workplace and promote smoke-free workplaces

#### National HIV Action Plan

- Prevention actions at the workplace
- Non-discrimination and inclusion: Access to suitable employment and non-discriminatory work environment

# National Back school "Prevendos"

- Financed by the Ministry of Health and Ministry of Social Security (CNS and AAA)
- Organised and fonctionning by the STM, accessible for all workers in Luxembourg
- Aim: create and support actions in the field of occupational health medicine in order to prevent back-pain and aggravation of back-lumbar diseases

#### Prevendos has developed training in 2 main areas of prevention

- Primary
  - prevention training "A day for your back" by internal trainer
  - financed by AAA
- Tertiary
  - training for low back pain "Living and working with your back" (10 days) to ensure a better quality of life for employees with severe low back pain
  - Co-financed by the National Health Fund –CNS (partial compensation for employers resulting from absence at work)

# Poster of "Prevendos"



# Occupational Health Award I





- Occupational Health Award (2007-2015 period)
  - Developed by the Ministry of Health
  - Addressed to companies which make remarkable efforts to improve the health and well-being of employees. Priority was given to innovative, creative and sustainable projects that obtained the support of workers

# Occupational Health Award II

Lydia Mutsch: MOH 2013 - 2018





# National Occupational Safety and Health Award

#### National Occupational Safety and Health Award (2018- now)

- 2018 laureates health section
  - Pétillances S.à.r.l. : « Keskonfaisi »
  - Centre Hospitalier de Luxembourg : « SCALP »



- 2020 laureates health section
  - Centre Hospitalier du nord: « Kinaesthetics dans le secteur hospitalier
  - Centre Hospitalier Emile Mayrisch: Prévention et gestion des situations d'agressions physiques et verbales au travail »



# 3. Current weaknesses of OH

### Current weaknesses I

#### Chronic shortage of OHP and lack of a multidisciplinary team in every OHS

- The huge number of mandatory medical examinations, without added value, to be carried out by OHP, does not allow them to focus on workers which are highly exposed and to develop more health prevention and to promote health activities
- Labor code does not foreseen a proper activity for occupational health nurse
- Non-uniform organisation of OHS and governance
  - The organisation of OHS provided by the Labor Code does not allow an involvement of the strategy of the authority, except for the STM
  - □ The Labor Code does not establish a well-structured governance between the three major authorities involved: Ministry of Health, Labor and Social Security
- Insufficient funding of occupational health services in Luxembourg
  - The Chamber of Employees claims that the way in which the financing of OHS must be reviewed and that 0.10% of the gross payroll of the largest service (STM) is not enough

# Current weaknesses II

- Labor Code insufficiently takes into account the aspects of prevention and health promotion
  - Prevention is currently based essentially on the physical risks to which employees are subjected, while the psycho-social risks and the overall health of the employee are often ignored
- Not enough involvement of OHP and social partners in the development and implementation of National Health Plans concerning the workplace
- The occupational health services collect a lot of data on the health of employees which are not exploited from a public health point of view
- Revision of the list of occupational diseases
  - Review the current list and in particular the aspects concerning musculoskeletal disorders (back pathologies) and reflection on those related to certain psychosocial risks

# 4. Some solutions

### Some solutions I

- Redefine the missions of occupational health services
  - Missions should be reoriented to
    - Focus on medical examination with added value
    - Prevent professional disinsertion and help keep workers with health limitations in employment
    - Taking consideration of the emergence of psycho-social risks
    - Focus on disease prevention and health promotion
    - Focus on well-being at the workplace
    - Establish a link between health statistics of OHS and the strategy of the national public health policy
- Redefine the human resources of OHS and multidisciplinary team
  - Occupational health nurse
  - Social worker
  - Labor psychologist
  - Ergonomist aso...

### Some solutions II

- Reduction of missions requiring the intervention of occupational health physicians
  - Reduce the categories of workers who must be subject to a mandatory and periodic review
  - Review the frequency of employee health surveillance
  - Limit the action of OHP to people still under employment status
- Consider new missions to occupational health nurses (doctor-nurse duo)
  - Collaboration protocols between nurse and doctor and define the concept of a nurse interview with the establishment of a health record in the Labor Code
  - Guarantee access to the OHP whenever an employee requests it
  - Determinate the criteria to be met for the specific training of the occupational health nurse and / or the employee responsible for visiting the workplaces

### Some solutions III

#### Better use of occupational health reports

- □ The annual activity report of OHS regarding health surveillance of the workers and inventory of risky workplaces should be improved and above all standardized
- Establish a link between the cancer registry and the data provided by OHS regarding exposure to a risk of occupational cancers
- Integrate data from the field of occupational health in the register of the new national health observatory

#### Fight against the chronic shortage of occupational health physicians

- Increase the attractiveness of occupational medicine by increasing the level of remuneration
- Introduce an university curse of occupational medicine at Uni LU

#### Establishment of a link between the occupational health physician and the general medical practitioner for better "prise en charge" of sick employees

Provide the possibility for OHP to access the shared medical care record (e-santé) with elements of the health record such as the detection of diseases and risks at work

# 5. Questions / Answers