



Łódź 13-15 September 2019

Minutes of the Section Meeting (*draft*)

Date: 13-14 September 2019

Location: Nofer Institute of Occupational Medicine (NIOM)

Address: ul. Św. Teresy od Dzieciątka Jezus 8, Łódź, Poland

Company/work-site visit (11–16h Friday 13 September)

Our host (Nofer Institute of Occupational Medicine – NIOM), which was founded in 1958, was granted the highest national scientific research grade. Professor Wojciech Hanke, deputy director of scientific affairs gave us a short overview of the research activities. We learnt that NIOM's budget was around 8 million Euros and only 20% comes as state subsidy. The remaining part is financed by research projects (over hundred in a ten year period) and services, which are accredited. They hold GMP and GLP labels. Currently there are 291 employees working in the following fields: diagnosing occupational diseases, toxicology, epidemiology, hygiene, psychosocial issues, physiology-ergonomics and the organisation of occupational health. There are sixty-seven researchers. The Institute, which is a WHO Collaboration Center, is licensed to issue PhD and to habilitate. NIOM publishes the International Journal of Occupational and Environmental Medicine (IJOEM) and *Medycyna Pracy*. (See Annex 1)

We were guided around the laboratories being developed on real needs: occupational diseases and environmental health clinic (e.g. respiratory laboratory), emergency toxicology care unit and information centre (linked to the hospital, ~2500 cases/year, ~10 professional cases), driving simulator (ECG, EEG, eye-tracking, video recording – See Annex 2), chemical laboratories (biomonitoring, metals, dioxines, phtalates, metabolic profiles, ICPMS-(LC), laser ablation, etc).

After the lunch of hearty Polish specialities we visited the nearby Gillette Factory (Procter&Gamble) that features the entire portfolio of the brand. The company representatives informed us that there were 1200 employees, 70% males working in 3 shifts in the highly automated production. Exposures are plastic moulding, sharp blades, forklift traffic and noise. It is P&G policy to have one dedicated doctor to each factory. Besides occupational medicine (8 hours/week) the health care company also provides internal medicine specialist (8 hours/week) at the site. There are other specialists at the facilities of the provider. An external psychotherapist is available for workers for ten visits. There are ~280 employees trained in first aid.

In the evening we joined to have local food at a restaurant in Manufaktura Market, which is an old textile factory site in the city centre revamped as culture, shopping and leisure meeting point.

Section meeting (9-17h Saturday 14 September)

1 Welcome and introductions

We were sadly informed that our former Finnish delegate dr. Ritva Hälimäki Aro had passed away.

The new Norwegian and the second Polish delegates were introduced.

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2 *Participants and apologies*

PARTICIPANTS: Hosts: Jolanta Walusiak Skroupa and Marcin Rybacki.

Alenka Škerjanc, president (Slovenia), Simon Bulterys, treasurer (Belgium), Ferenc Kudász, secretary (Hungary), Karl Hochgatterer (Austria), Jelena Macan (Croatia), Fabriziomaria Gobba (Italy), Maja Eglīte (Latvia), Nicole Majery (Luxemburg), Yogindra Samant (Norway), Pedro Gustavo Reis (Portugal), Emil Vancu (Romania), Davor Romih (Slovenia), Romuald Krajewski (UEMS Central)

APOLOGIES: Milan Tuček (Czech Republic), Ole Carstensen (Denmark), Satu Rannisto (Finland), Kari Reijula (Finland), Thomas Kraus (Germany), Theodore Bazas (Greece), Tom O'Connell (Ireland), Marc Jacoby (Luxemburg), Dick Spreeuwiers (the Netherlands), Elena Pauncu (Romania), Marek Varga (Slovakia), Mari Cruz Rodriguez Jareño (Spain), Klaus Ernst Stadtmüller (Switzerland), Nerys Williams (UK).

3 *Presentation from the host country*

The system of Polish occupational medicine was presented by the Polish delegates.

Occupational health screening is mandatory by the Labour Code. There are three levels of occupational medical care: primary services at companies, regional centres, and the national NIOM. There are 6685 doctors authorised to carry out fitness-for-job examinations; only one-third are OM specialists. In 1996 a decree let physicians working in the field of occupational medicine to get the specialisation after a six month training in NIOM. Workers not exposed to risks listed in the decree can be examined by their general practitioners. Around 50% of doctors do worksite visits. The Ministry of Health is busy with other issues and occupational medicine receives less attention. Thus the obsolete guidelines on minimum health requirements cannot be changed. This results many superfluous specialist examinations: e.g. regardless of testing by the occupational physician the worker must be sent to a specialist for work in many job titles. Meanwhile, due to migration to the West, there is a shortage of all sorts of medical specialists in Poland. Except for occupational infections, there is a closed list for occupational diseases, which was agreed by social partners. However, e.g. the criteria for COPD cannot be fulfilled because there are no measurement data from the past. Occupational diseases are diagnosed in regional centres; NIOM carries out the second instance investigations (~400/year) – these activities are financed by the state. In 2018 there were 2002 occupational diseases among the 14 million employees. Chronic voice disorders among teachers, and Lyme disease are leading diagnoses. People are not keen on having their occupational diseases diagnosed because the compensation is low and the change of work becomes unavoidable. The Amiantus programme focuses on screening and testing persons having been exposed to asbestos. The OM specialist training contains 3 years of internal medicine and 2 years of occupational medicine. In Poland OM is attractive as a second specialisation for general practitioners and internal medicine specialists. In their vision our hosts depicted OM specialists present at the workplace and support workers' health, using check-ups for prophylactic examinations, focusing on mental health issues (as classical occupational diseases being not frequent any more). *See Annexes 3-7.*

4 *Minutes of the last meeting (Açores)*

The minutes of the last meeting were anonymously accepted. *See Annex 8.*

5 *Reports from meetings*

There was an ICOH meeting on musculoskeletal disorders in Bologna. International co-operation is needed by the group.

6 Section finances

Eleven countries made their 2019 contributions and four countries for 2018. Expenses related to the preparations for the exam. Group members kept the costs low. The expected incomes and costs are foreseen to be balanced so the financial situation is stable and future contributions can be decided at the next meeting. See *Annex 9*.

7 Website

The Danish delegate managing the website could not attend. Personal emails should be removed from the webpage and a central email address should be provided that is forwarded to the officers. Comments to improvement should be sent to the Danish delegate.

8 Information from UEMS Central

Prof. Romuald Krajewski, president of UEMS gave us updates on the central organisation. Inviting the sections to the Advisory Board was a step to mainstream their opinion into the management. UEMS central highly respects professional autonomy. Information / web presence / healthcare policy cannot be fulfilled from the current budget. The European Accreditation Council for Continuing Medical Education (EACCME) manages over 2000 live events every year. He praised the Section website and congratulated on the EU exam (counselling a disclaimer for the examination). Some countries accepted UEMS exams as part of their national system. However, it is not foreseen to be mandatory on European Union level in the close future. UEMS does not want to compete but to co-operate with European societies. UEMS Central can financially support Sections in case of a reasonable need. He agreed that environmental medicine could be addressed by a MJC, a division of a Section or by name change. The recognition of different OM levels in Luxembourg was discussed deeply.

9 Country information template

The Croatian delegate shared their experience with the new template, which they used to make a presentation. It was a handy tool to create a national self-overview. The following issues were raised during the discussion: Objective (figures) versus subjective elements; Who is the target audience (Section website reader?); Making country comparisons is a huge work. The first part of the template should be simplified. Working groups 2 and 3 should decide. It was agreed that the website content should be refreshed with current data; the 3rd part of the questionnaire should be filled first; and the author of the template (Greek delegate) is asked to set the aims of the questionnaire.

10 Working groups

There were not enough members from WG2 to form a working group. WGs summarised their activities, which were discussed by the participants.

11 Working groups report

WG1

The group provided answers to the concerns raised by the Greek delegate previously. It is emphasised that the exam is absolutely voluntary, is a mark of excellence, is not necessary to be approved nationally, MCQs are the golden standard of CESMA, as questions are secret they cannot be circulated, the four UEMS-OM evaluators and the CESMA observers are the guarantee for high quality. The WG invites all Section's delegates to send a national report on their activities in promoting the exam (recommendations: national conferences/days, young doctors, trainees, emigrant specialists, trade unions, newsletters). The delegates unanimously

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approved the launch of the exam. The WG sets the roadmap. Furthermore, they shall provide ten questions per topic for the next meeting. The ETR will be revised in the future.

WG2

The group should help updating the national contents at the Section webpage. Continuing with the group's chair could also address the protection of OM providers (existing only in France) and the promotion of occupational health in the new European Parliament (health of members).

WG3

The core issues were: tasks of OM specialists, delegating tasks, training, collaboration with other experts. They will make a short reminder on the results and continue at the next meeting, based on papers and WHO documents on service quality circulated.

12 Co-operations

The EASOM summer school on occupational cancers in Riga was a success. There were 68 participants, a statement was published and the presentations are available at: <https://www.easom.eu/summer-schools/summer-school-2019> The 2020 meeting will be in Belgrade. The topic is OM training (including undergraduates).

The EU-OSHA Healthy Workplaces Campaign on dangerous substances is closing with the European Summit. (Follow-up: The Spanish delegate participated at the Summit in order to strengthen the network of the Section). Delegates are kindly requested to fill in the attached form (Annex 10) by showing how they promoted the Campaign and send it back to the Secretary who will compile a report to the Agency. It is important to show our contribution. The next campaign will be on musculoskeletal disorders, which is also highly relevant for our speciality. EU-OSHA is to be invited to the next section meeting. The new Norwegian delegate is also a national board member to EU-OSHA.

The President will meet the ETUI representative at the Czech conference.

13 CME (and related) events

- 9-13/October 2019 – 7th congress on occupational health (Pula, Croatia)
- 29-30/May/2020 – Musculoskeletal disorders as European and world problem (Bled, Slovenia)
- NIVA courses. <https://niva.org/courses/>

14 Next meetings

8-9/May: Luxembourg (Luxembourg) – confirmed

16-18/October: Amsterdam (the Netherlands) – to be confirmed

Spring 2021: Bratislava (Slovakia)

Autumn 2021: Ljubljana (Slovenia)

15 Any other business

The Memorandum of Understanding with EASOM was unanimously agreed by the delegates. Follow-up: the text was found too legal and less co-operative so the Section President agreed with the EASOM president to revise it before signature.

16 End of meeting and Gala dinner

The meeting closed at 17:00 p.m.

The delegates were invited to a dinner at a stylish restaurant in Manufactura Market by the

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Polish association. We could also feast the birthday of the Croatian representative with delicious Polish food. On Sunday a city tour was organised.

The Section is grateful for the well organised meeting and for the hospitality.

Alenka Škerjanc
president

Ferenc Kudász
secretary