## Peer Review on "The efficient transposition, implementation and enforcement of EU OSH legislation"

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#### "Getting in Tune" – transposition, implementation, enforcement and orchestration of OSH legislation in Denmark

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### If regulation and enforcement is the answer – what was the question?

What works in OHS policy?

- How can enforcement of occupational safety and health (OSH) legislation continuously address the correct issués?
- Why are we regulating OHS? Which enforcement strategies and approaches or other preventive measures have been shown to result in high levels of compliance and effective prevention?
- How can the impact of enforcement strategies and approaches in relation to compliance and effectiveness be measured?
- How will we know if enforcement What are effective criteria and practical methods for enforcement, e.g. how can data driven risk models be applied effectively?
- How can greater transparency of enforcement of OSH legislation benefit other Member States' enforcement activities? What type of data and information should be collected and reported?

## The Purpose of 'Transposition, implementation and enforcement'



#### Reduction of sick leave absence

- 6% absence in a medium sized company will cost 1 mill. Euro a year. (Source: DI)
- Long term work related sick leave absence (> 3 weeks) is a societal cost of 2 bill.
   Euro (Source: LO)



#### Health costs

Occupational diseases and injuries cost EU 476 billion euros or 3.3 per cent each year of total EU GDP. (Source: EU-OSHA)



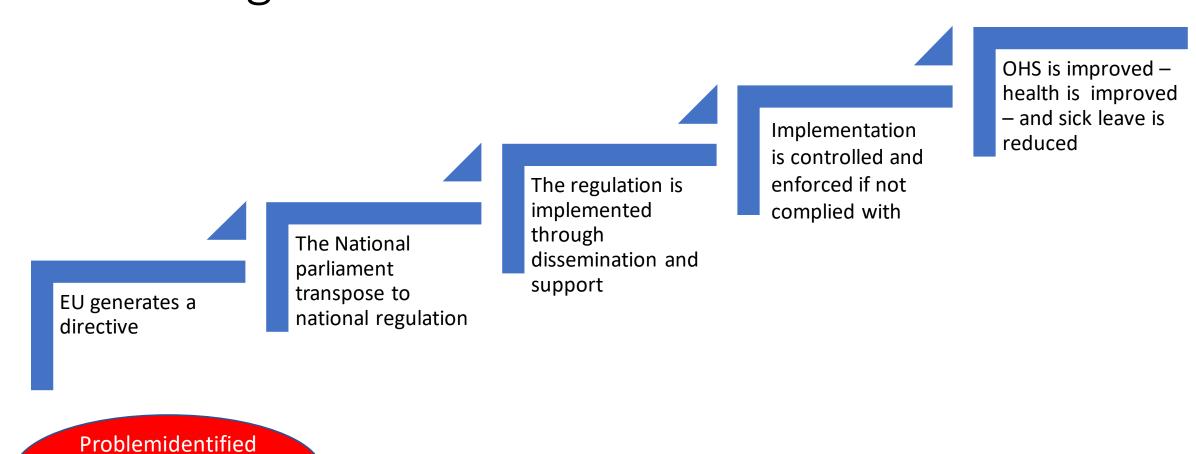
#### **Dignity**

Ensuring healthy lives and promoting the wellbeing for all at all ages (Source: UN – Goal 3)

## What works? - The standard Road Map of OHS - Regulation

and documented

by research



# The Danish approach and policy instruments

Sectoral WE
Councils:
Dissemination of
guidelines and
knowledge

Research and statistics on OHS

Political priorities

Sermon

Stick

2005 O.H.S. privatised

National Regulation



**EU Directives** 

Transposition = Incorporation

The social partners

Tripartite

**DWEA** 

Implementation

Enforcement

Carrot

Control and enforcement:
Risk Based Inspection (2002)
Focusing on

- a) Enterprises with a high risk index (risk sectors, surveys and statistics on work and health, accidents, occupational diseases etc.)
- b) Experience from former inspections (2007 11 all companies screened)

Orders, advices, fines, smileys etc.

Occasional programs to **fund and support** local implementation and development

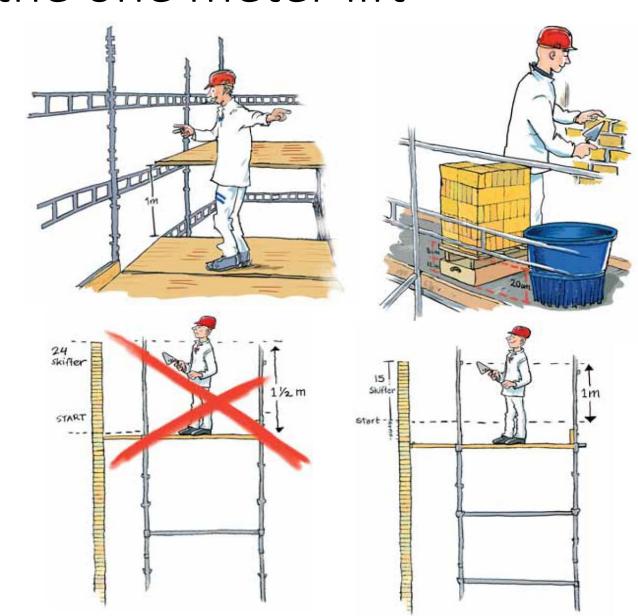
### How does it work: The case of "bricklayers low back pain"

- Council Directive 90/269/EEC of 29 May 1990 on the minimum health and safety requirements for the manual handling of loads where there is a risk particularly of back injury to workers
- Research proved high level of low back pain and wear out among bricklayers due to very low or high work postures
- No obvious prevention strategies were known

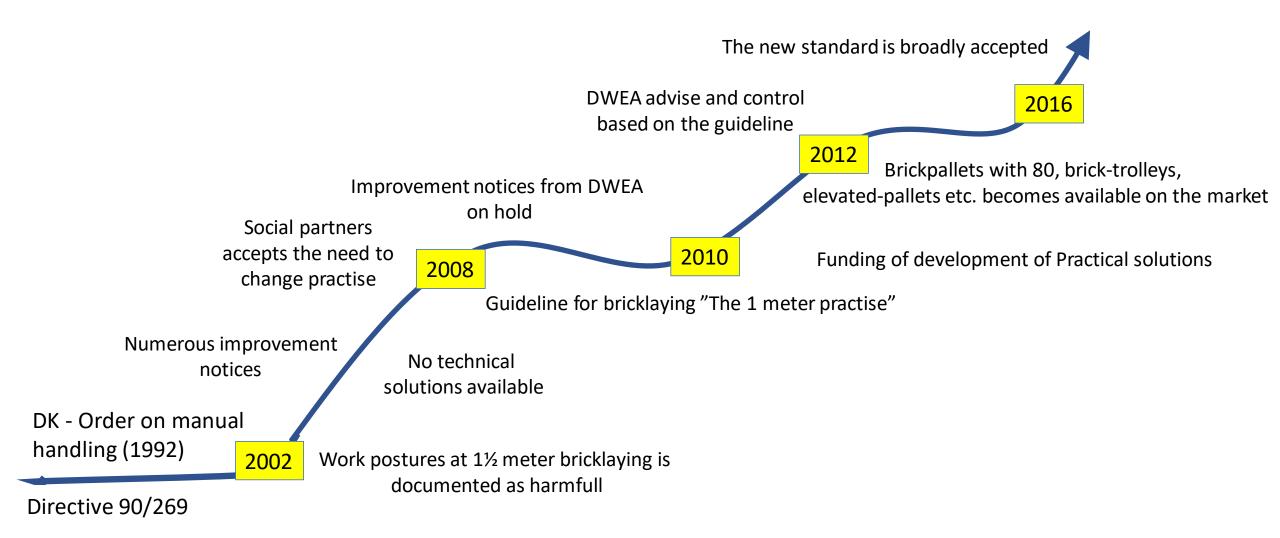


#### The 'agreement' on the one meter lift'

- The social partners agreed to jointly develop a guideline for the 'one meter lift'.(2008):
  - Scaffold is raised after each meter (before 1½)
  - Brick pallets and mortar buckets were raised
  - Brick-pallets with 80 instead of 122 bricks
  - A new trolley for transport of bricks
- DWEA approved it.



## The road map of reducing bricklayers low back pain



#### Impediments

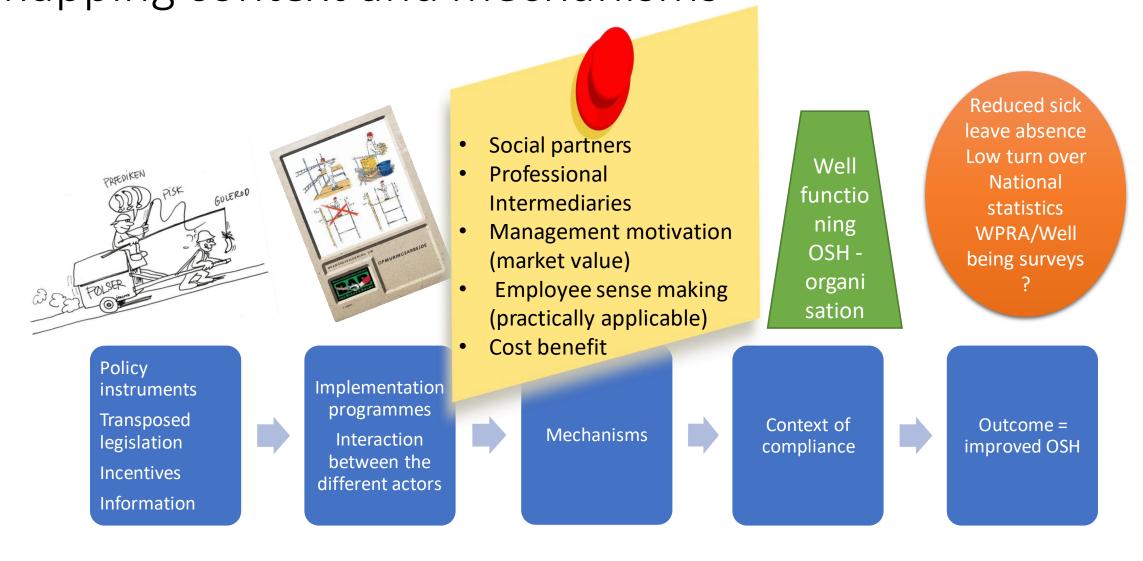
- The construction site laborers are carrying heavier loads, more bricks and mortar, raising more scaffolds.
- Brick trolleys are not available or of poor quality
- Not all brickworks provide '80 brick pallets'







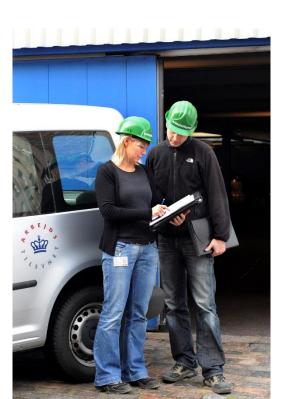
Understanding 'the road' from Policy to improved OSH — mapping context and mechanisms



# How can enforcement of occupational safety and health (OSH) legislation continuously address the correct issues?

- Legislation and enforcement can give priority to problems, but will not prevent them
- Enforcement must be connected to:
  - The development of practical solutions, guidelines,
  - Support on company level to change rigid practices and develop preventive

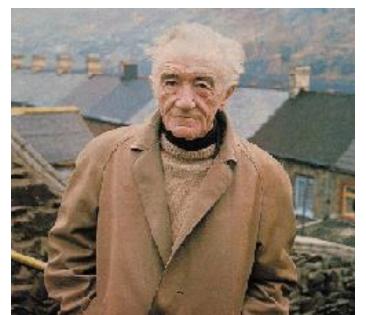
 Enforcement, control and advise is only one important player in the synergy of improving OSH



# How can the impact of enforcement strategies and approaches in relation to compliance and effectiveness be measured?



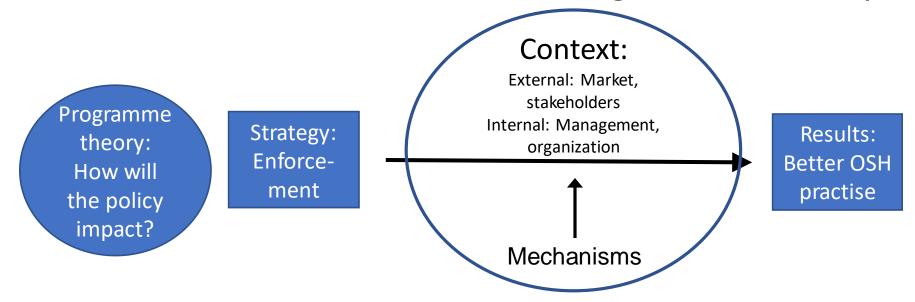
- The road from EU directives to improved OSH on workplace level is complex, involves several actors and it is not 'a linear process'
- Impact of enforcement should not be measured as effect only causal relations are way to complex



Archibald Cochrane: Understanding effect is based on good RCT Studies, to understand how and when a treatment works you must ask the patient and consult your experience

#### Evaluating impact of policy instruments

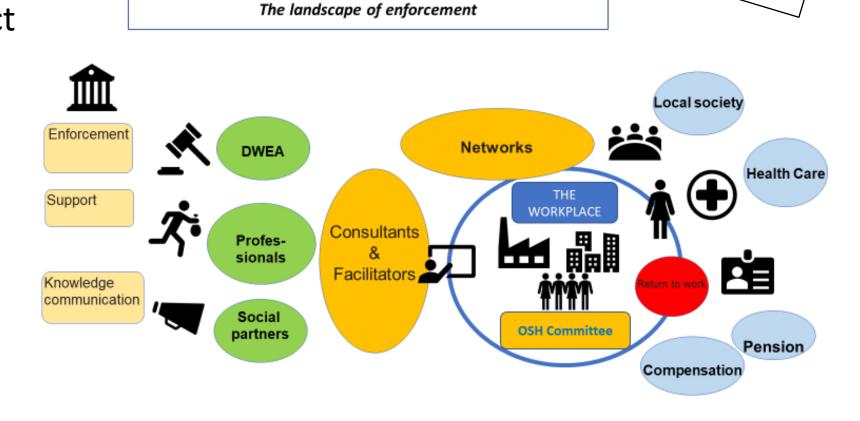
- Policy programs are evaluated in relation to changes in accidents, sick leave, turn over, cost in health care and Key Indicators of OSH activities.
- To know 'how and when' policy programs have an impact we need a better understanding of 'The process from Transposition to Practice'
- 'Realistic evaluation' can uncover 'regularities' in the process.



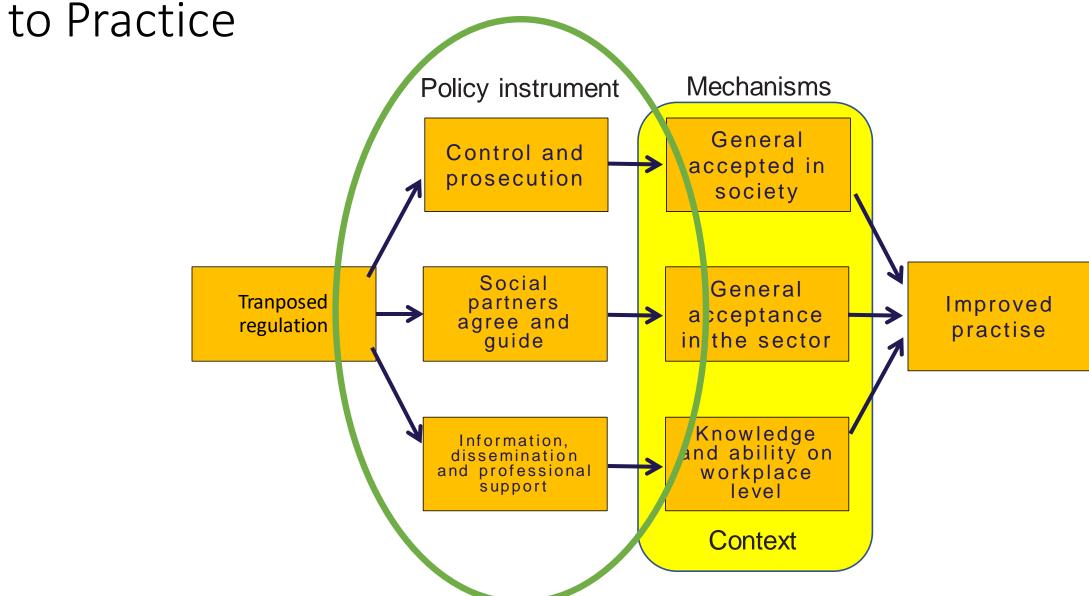
Which enforcement strategies and approaches or other preventive measures have been shown to result in high levels of compliance and effective prevention?

What works?

 Compliance is not an act of 'will' or 'will not' – rather it is a rationale based upon a number complex and coherent exposures, influences experiences and decisions.



The policy instruments of the process from Transposition



#### Orchestration – a new way?

- The strategy of the 2020 plan comprise that:
- A number of actors coordinates resources and activities
- Different policy instruments are involved and coordinated
- Knowledge transfer, development of solutions and legitimacy are integrated
- Companies receive the same message from numerous sources
- A bundle of activities with no plan and not in tune - is not orchestration
- The questions is how 'the music' sounds to 'the audience'!

