OPTIMIZE THE COLLECTION AND USE OF OSH DATA

A contribution to the implementation of Sustainable Development Goal 8

WORLD DAY FOR SAFETY AND HEALTH AT WORK
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There is a critical need for countries to improve their capacity to collect and utilize reliable occupational safety and health (OSH) data for prevention purposes.

OSH data is indispensable for setting priorities and measuring progress at enterprise and national levels in:

- the detection of hazards and risks;
- the development of OSH preventive programmes;
- the identification of hazardous sectors;
- the implementation of policies at enterprise, national and international levels;
- the elaboration of comparative national statistics and reports, and the contribution to national and international figures and awareness raising.

For this year’s campaign, an ILO toolbox on OSH data was developed. It includes a set of fact sheets, guidance materials, codes of practice, international labour standards, good practices at country level, strategy documents, reports and databases relevant to the subject. It can be found in the SAFEDAY Webpage (www.ilo.org/safeday).
Multiple ILO OSH Conventions require ratifying member States to establish mechanisms to collect and utilize reliable OSH data for the prevention of occupational accidents and diseases.

The capacity to collect and utilize reliable OSH data has also become indispensable for countries to fulfil their commitment for implementing and reporting on the United Nations 2030 Agenda for Sustainable Development adopted in 2015.

Sustainable Development Goal num. 8 provides for “the promotion of inclusive and sustainable economic growth, full and productive employment and decent work for all”.

Its Target 8.8 focuses on “the protection of labour rights and promotion of safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment.”

Countries have to report on the indicator of Target 8.8: “Frequency rates of fatal and non-fatal occupational injuries, by sex and migrant status.”
National systems for recording and notification of occupational accidents and diseases
National systems for recording and notification of occupational accidents and diseases are traditionally used for compensation purposes.

The competent authority can be the ministry of labour and/or social security, a government department or other public authority designated with the power to issue regulations or orders having the force of law in relation to the system.

The competent authority in consultation with the most representative organizations of employers and workers, should ensure the establishment and application of procedures for:

- notification of occupational accidents and occupational diseases;
- notification of commuting accidents (accident resulting in death or personal injury occurring on the direct way between the place of work and: (i) the worker’s principal or secondary residence; or (ii) the place where the worker usually takes a meal; or (iii) the place where the worker usually receives his or her remuneration);
- investigation of accidents causing injuries;
- production of annual statistics on occupational injuries, diseases, and fatalities; and
- as appropriate, notification of dangerous occurrences and suspected cases of occupational diseases.
The parties that can be involved in the reporting or notification of occupational accidents and diseases are:

☑ Employers and others directly concerned, have the primary responsibility to notify the competent authority in most legislation.

☑ OSH committees can provide information on accident investigations and data on occupational injury and disease in their workplace.

☑ Trade unions often collect data on occupational accidents and diseases in their respective industry or sector for awareness raising purposes.

☑ Labour inspectors investigate serious accidents and enterprise visits may reveal previously non-reported cases.

☑ Employment insurance schemes receive relevant information on the consequences of occupational injuries and the long-term effects of work-related diseases.

☑ Health personnel in hospitals can provide first-hand information after treating occupational injuries and diseases.

☑ Police officers and emergency services are often the first point of contact for help when accidents occur and may be involved in workplace investigations for the causes of severe accidents in many countries.
A national system for recording and notification of occupational accidents and diseases should aim at:

- Covering all branches of economic activity, all enterprises and all workers, regardless of their status in employment, and throughout the country.
- Providing comprehensive and reliable data on the incidence of occupational accidents and diseases for the design of preventive OSH measures at enterprise, sector and national level.
- Publishing comparative national statistics and reports for prevention purposes and contributing to international figures.
- Incorporating an harmonized system of definitions and classification of occupational injuries and diseases.
- Creating and regularly updating a national list of occupational diseases together with a set of diagnostic criteria to facilitate the recognition and compensation of occupational diseases.
- Ensuring appropriate and effective employment injury compensation schemes.
Challenges for the collection of reliable OSH data
Some of the challenges to establish effective recording and notification systems providing reliable data that can also be used for OSH purposes are:

- Coverage is not comprehensive in national legal frameworks resulting in exclusion of certain branches of economy or certain categories of workers.
- National systems of recording and notification are not consider an integral part of occupational risks management.
- Diagnostic and recognition criteria for occupational diseases vary among countries; the diagnosis of occupational diseases requires specific knowledge and experience that are not adequately available in many countries.
- Responsibilities for OSH may be divided among multiple authorities (i.e. ministries of labour and health, social security bodies, public and private insurance institutions and other parties). This results in discrepancy and incompatibility of data collected which do not allow for the assessment and production of national or global statistics.
- Terminology, definitions and classifications are developed for purposes of compensation and vary among countries; available data are not harmonized at country level making it difficult to assess regional or global trends.
In many countries, availability of reliable data on occupational injuries and disease is conditioned by underrecording and underreporting. Some of the causes are associated to:

- complexity of procedures for recording and notification and paperwork;
- different organizations requesting reporting and different reporters;
- measurement errors and timing of record retrieval;
- late reporting of injuries and diseases with long latency periods;
- reluctance to report immediately or use of private physicians;
- differences between what is compensable and what is recordable;
- discrepancies between recorded and notified cases of injury and compensation claims.

Furthermore, delay in reporting or its omission hinders the appropriate treatment and compensation of injured or ill workers.

Although OSH data is different from country to country, other countries’ data and international information sources can be valuable as a reference, especially for countries lacking reliable national statistics.
Complementary data sources on occupational accidents and occupational and work-related diseases
As most of countries face the constraints of underrecording and underreporting of occupational accidents and diseases, some countries complement statutory notification with data collected from other sources to obtain a fuller picture and assess OSH status and progress:

✓ Special surveys, such as working environment surveys; OSH related questions can also be included in national health surveys and labour force surveys.

✓ Other regional and national health administrative data can provide information on worker’s health, on the distribution of mortality, disease and injury across occupations and sectors, such as:

✓ demographic census data;
✓ hospital and primary health care records;
✓ exposure registries;
✓ medical inspections carried out by the health inspectorate, where appropriate.

✓ mortality data from death certificates;
✓ trauma and disease (including cancer) registries;
✓ laboratory registries;
A National Occupational Health Surveillance System is used for monitoring the mortality and morbidity of occupational injuries and diseases, and is a useful complement of information as it can include:

- individual and collective health assessments, sentinel event notifications, health surveys, investigations and reports from medical inspections;
- suspected cases of occupational diseases for an appropriate follow up on the possible occupational origin of diseases with long latency periods; and
- a sub-system of occupational health history records of individual workers to be followed throughout their working life.

At enterprise level:

- The recording of near-misses or incidents and their monitoring are key to OSH performance and provide information in cases where surveillance of actual injuries yields insufficient data.
- Incident reporting schemes developed for the rapid identification of hazards, timely initiation of preventive measures and prompt control of major accidents and industrial disasters can also be used as sources of information.
To fill the current gap on coverage and reporting and increase awareness on the magnitude of the problem, the ILO periodically publishes global estimates of occupational injuries and occupational and work-related diseases.

Current estimates show:

✓ Work-related accidents causing injuries: 313 million.
✓ Work-related fatal accidents: 350,000.
✓ Occupational and work-related fatal diseases: 2 million.
✓ Work-related deaths: 2.35 million.
✓ Lost GDP on occupational accidents and diseases: 4 %.
ILO tools for recoding and notification of occupational accidents and diseases
The ILO provides guidance through a number of instruments and technical tools to support member States in improving their recording and notification systems of occupational accidents and diseases both for prevention and compensation purposes. The most relevant standards in this area are:

✓ the Promotional Framework for Occupational Safety and Health Convention (No.187) and its accompanying Recommendation (No. 197);
✓ the Occupational Safety and Health Convention & Protocol (No. 155) and its accompanying Recommendation (No. 164);
✓ the List of Occupational Diseases Recommendation (No. 194);
✓ the Occupational Health Services Convention (No.161) and its accompanying Recommendation (No. 171);
✓ the Social Security Convention (No.102);
✓ the Employment Injury Benefits Convention (No.121) and its accompanying Recommendation (No.121);
✓ the Labour Statistics Convention (No. 160) and its accompanying Recommendation (No.160);
✓ the Labour Inspection Convention & Protocol (No.81) and its accompanying Recommendation (No.81).

The ILO Code of Practice on Recording and Notification of Occupational Accidents and Diseases complements these provisions.
The ILO Statistics Department collects and disseminates annual statistics on occupational injuries and fatalities from over 100 member States.

**ILOSTAT** (the ILO Database of Labour Statistics) provide data in particular on:
- fatal and non-fatal occupational injuries by sex, economic activity and occupation;
- days lost per occupational injury by sex, economic activity and occupation;
- days lost due to cases of occupational injuries with temporary incapacity for work by sex, economic activity and occupation;
- labour inspection statistics, including registered workplaces that could be selected for labour inspection; number of labour inspectors by sex; number of labour inspection visits to workplaces during the year; inspectors per 10’000 employed persons; and visits per inspector.

The International Conference of Labour Statisticians (ICLS) develops international standards on labour statistics and recommendations on selected topics in the form of resolutions and guidelines. It designs classifications and other methodological procedures that when used by national parties can increase the likelihood of having national and international comparable labour statistics. The Report of the 16th ICLS refers to statistics on occupational injuries.
Steps for strengthening national OSH systems’ capacity for dealing effectively with the prevention of occupational accidents and occupational and work-related diseases
✓ Improve collaboration of relevant governmental institutions on OSH and social security bodies in dealing with the adequate prevention of accidents and serious injuries and the prevention, early detection, treatment and compensation of occupational and work-related diseases.

✓ Integrate the prevention of occupational diseases into labour inspection and health surveillance programmes, with particular focus in hazardous sectors, such as mining, construction and agriculture.

✓ Strengthen Employment Injury Benefit Schemes in national social security systems by incorporating a preventive approach and adequately dealing with the recognition, treatment and compensation of occupational diseases.

✓ Improve the capacity of occupational health services for workers’ health surveillance, monitoring of the working environment and implementation of preventive measures.

✓ Update national list of occupational diseases taking into account the ILO list.

✓ Reinforce social dialogue on issues related to OSH at national, sectorial and workplace levels among governments, employers and workers and their organizations.
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