

#### Report of Activities for the period

1<sup>st</sup> November 2011 – 31st December 2012

## **Budgeted Income and Expenditure Account**

1<sup>st</sup> January 2013 – 31<sup>st</sup> December 2013

**Occupational Health and Safety Authority** 

17, Edgar Ferro Street,

Pieta`, PTA1533 MALTA

http://www.ohsa.org.mt

2013

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#### Preface

The Occupational Health and Safety Authority Act, Cap. 424, was published on the 17<sup>th</sup> November 2000 and brought fully into force on the 29<sup>th</sup> January 2002. In terms of the Act, it is the responsibility of the Occupational Health and Safety Authority to ensure that the physical, psychological and social well being of all workers in all work places are promoted and safeguarded by whosoever has such a duty.

The following is a report of the Authority's activities for the period November 2011 to December 2012, and is being published in terms of section 37 of the Act. It includes the Authority's Budgeted Income and Expenditure Account for the period 1<sup>st</sup> January 2013 to 31<sup>st</sup> December 2013 (section 31 of the Act).

Normally, the Authority presents to the Minister its report of activities and an audited statement of accounts for the preceding full year, together with its estimates for the subsequent year at the end of its financial year. However, since the Authority's last report and estimates were tabled and debated by the House on the 28<sup>th</sup> November 2011, the Authority's last report only covered the period ending 31<sup>st</sup> October 2011. The audited accounts of the Authority for the period 1<sup>st</sup> January 2011 to 31<sup>st</sup> December 2011 and the accounts for the period 1<sup>st</sup> January 2012 to 31<sup>st</sup> December 2012 are being published separately. As explained previously, the last audited accounts presented to Parliament covered the period January to end of October 2011. Whereas an audit of OHSA's accounts was held to cover the two remaining months of 2011, and which were not covered in the previous audit presented to Parliament, a full audit of OHSA's accounts was also carried out to cover the whole calendar year, which report is also being presented to Parliament for its consideration.

Furthermore, the last Authority's Budgeted Income and Expenditure Account approved by Parliament covered the period 1<sup>st</sup> January to 31<sup>st</sup> December 2012. Towards the end of 2012 (specifically on the 5<sup>th</sup> of December 2012) OHSA's Collective Agreement for the period 2012 – 2016 was signed, having been agreed upon by OHSA, PACBU, MHEC and UHM as the union representing the majority of employees at OHSA. The said agreement provided, *inter alia*, for an increase in wages with effect from January 2012, as well as one-off payments to each employee who was in employment with the Authority in 2011. The full extent of this expenditure (amounting to  $\leq 15,781$ ) was not covered by the estimates of the Authority approved by the House of Representatives for the period January to December 2012, since the aggregate payment due for 2011 and 2012 in terms of the agreement was in excess of the contingency provided for in the said estimates. For this reason, the Authority sought the Minister's approval in terms of section 32

(2) (d) of the Occupational Health and Safety Authority Act which provides that:

"if in respect to any financial year it is found that...the need has arisen for expenditure for a purpose not provided for in the estimates, the Authority may adopt supplementary estimates for approval by the House and, pending such approval, the Authority may in special circumstances and with the approval of the Minister, incur the relative expenditure or part thereof as the said Minister may so approve..."

In view of the above the Authority prepared supplementary estimates and obtained the Minister's approval for the expenditure in question. Before doing so, the Authority had also obtained legal advice. The documentation in support of OHSA's seeking of Ministerial approval in terms of section 32 (2) (d) of the Act is being attached as Annex 4. Ministerial approval was in fact given on the 22<sup>nd</sup> December 2012.

The Authority strives to meet its goals by making full and efficient use of its resources, and in particular by meeting its own high standards of corporate governance. During the first quarter of 2012, the Financial Management Monitoring Unit (FMMU) within the Ministry responsible for Finance conducted an audit of the financial operations of the OHSA. This included a number of site visits to the authority's premises, and exchange of information. The findings concluded that the OHSA was operating to the general satisfaction of FMMU.

Currently, the Authority has four sources of revenue – the annual grant made by the Ministry of Finance, the Authority's own revenues from services for which a fee is charged, the payment to OHSA of administrative fines by intimated persons, and funds which are made available through foreign assistance, including EU Structural Funds. Despite increased economic pressures during the past year impinging on the way it manages its funds, and a reduction in the Government subvention, the OHS Authority managed to end its financial year with a small deficit which will be absorbed by the expected surplus for the current year 2013.

# **OHSA Objectives**

OHSA's overall objectives are:

- to foster a culture which values prevention,
- to increase awareness about the benefits of achieving and maintaining adequate levels of occupational health and safety,
- to mainstream OHS into all policy areas including public policy, procurement, and education,
- to maintain the downward trends with regards to ohs-related incidents which lead to injuries, diseases and deaths.

# Vision of the OHSA

The development of a culture which goes beyond the workplace, which adopts a holistic view of health and that values risk prevention.

The Maltese workplace will be an environment where health and safety are not considered as afterthoughts but are integrated throughout all work systems and processes.

Appropriate preventative measures will be in place in all workplaces in Malta to minimise the probability and severity of occupational incidents and illness. The ultimate goal is zero preventable incidents that can affect health and safety.

Employers and employees will be aware of the importance of preventative health and safety measures, and will have the knowledge, expertise and commitment to apply these measures to their workplace. The OHSA will be a partner to organisations, working together to improve health and safety at every opportunity.

Within the context of the European Union, Malta will participate effectively in discussions regarding the continuous development of occupational health and safety levels.

# **Mission Statement**

Working with others to ensure healthier and safer workplaces in Malta.

## **Mission analysis**

The OHSA mission is concise and direct: 'Working with others' means that the OHSA intends to involve and to collaborate with others (e.g. persons, employers, workers, constituted bodies, international organisations) in order to gather feedback on policies, generate commitment and obtain consensus – the OHSA does not want to be seen strictly as a controlling regulatory body.

The only way by which health and safety in the workplace will improve is if the process is self-regulating i.e. the employers themselves recognise that it is in their best interests to provide their workforce with a healthy and safe environment.

# Chairperson's Message

Despite economic uncertainties, OHSA continued working assiduously during the past fourteen months to improve the prevailing standards of occupational health and safety. Often using innovative approaches, and always operating in observance of strict governance principles, whilst maximising the cost-benefit of all its actions, OHSA managed to bring about further improvements, not only with regards to the number of persons, whether stakeholders or dutyholders, who are better informed of their rights and obligations, but also as evidenced in the sustained downward trends observed in the case of occupational injuries and fatalities.

These successes were also noted by the Director of the European Agency for Safety and Health, who during her visit to Malta, described OHSA as one of the most active and impressive focal points in the European Agency's network.

An important milestone has been reached through the introduction of administrative fines in 2011 that OHSA was instructed to commence such a system, that brought about speedier compliance and a reduction in judicial hardship for all accused persons. OHSA's reliance on the courts of law has also diminished a lot.

# Members of the OHS Authority, 2012 – 2014.

#### Chairperson

Ms. Roberta Messina

#### **Deputy Chairperson**

The Director of Industrial and Employment Relations, ex ufficio.

#### Members

Dr. Tanya van Avendonk, appointed by the Minister responsible for health;

Ms. Cecilia Rizzo, appointed by the Minister responsible for economic affairs;

Mr. Michael Bonnici, appointed by the Minister;

Mr. Edwin Balzan and Mr. Victor Carachi, appointed to represent the interests of workers;

Mr. Joseph Delia and Ms. Carmen Borg, appointed to represent the interests of employers.

#### Secretary

Mr. Remigio Bartolo

#### **Chief Executive Officer**

The OHSA Act provides for the appointment of a Chief Executive Officer who is responsible for the executive conduct of the Authority, its administration and organization as well as the administrative control of its officers and employees.

Dr. Mark Gauci is the incumbent Chief Executive Officer of the OHSA.

# Introduction

The past year has been a particularly challenging one for the Occupational Health and Safety Authority. The protracted global economic insecurity has continued to promote uncertainty and fuelled inaction in areas which may be considered as being of secondary importance, as is often the case with regards to occupational health and safety, and the Authority has had to increase its efforts to highlight the benefits of having adequate and acceptable levels and the positive correlation between sound standards, enhanced productivity and the sustainability of operations. Despite such uncertainties, Malta continues to register improvements in all measures of progress, including in the sustained downward trends in occupational injury and fatal accidents at work rates.

# **Review of Activities**

In terms of the OHS Authority Act, 2000, the Occupational Health and Safety Authority has the primary duties of promoting high levels of occupational health and safety for all workers at all workplaces, and ensuring that they are safeguarded by whosoever has such an obligation. These duties have to be fulfilled within the parameters of the general national policy established by the Minister.

## A Awareness building, information, education and training

Since it was established, OHSA has dedicated a lot of time and resources in disseminating information, raising awareness and increasing the knowledge available about current occupational health and safety issues. OHSA also believes in the importance of awareness-building (especially about the accruable benefits to society in general, the economy, the nation and individual workers when achieving adequate levels of occupational health and safety) and the need to ensure that the information available is continuously updated in view of the ever-changing world of work and the emergence of new risks.

For this reason, the Authority continues to provide information and to disseminate it as widely as possible. A number of press releases and feature articles have indeed been published in or reported by the local media. Moreover, a number

of information campaigns organized by the Authority have been linked with European initiatives, especially those organized by the European Agency for Safety and Health and the Senior Labour Inspectors Committee (SLIC).

## 1 Initiatives with School Children

### 1.1 NAPO

A change in culture and mentality will have a more positive outcome if the notion that achieving acceptable standards of health and safety is of benefit to all concerned becomes ingrained from an early age.

The information and awareness raising talks about occupational health and safety amongst pupils and students conducted by the OHSA staff remain very popular with schools in Malta. The current official mascot of the campaign 'NAPO' (as created by a European consortium) has become a household name in various localities. During the course of this past scholastic year, talks were held in a number of schools targeting students between the age of 9 and 10 years.

During these visits, students are guided through a short film featuring NAPO and a poster exhibition targeting mainly health and safety signs. This is then followed by an interactive talk. The mascot NAPO always makes an appearance at the end of the talk to distribute an informative and educational activity booklet produced by the OHSA which the students are encouraged to work through, either at home or as a class event. A good number of schools take up the opportunity to organize a health and safety day or week, with pupils working on projects targeting specific OHS subjects.

#### 1.2 Job exposure initiative

For the second consecutive year, OHSA participated in the commendable Job Exposure initiative in the Health Sector which was organized by the Career Guidance Section within the Psycho-Social Services Unit of the Education Division. A two week programme for two groups of secondary school students was drawn up in collaboration with the Education Division. The students had the opportunity to explore and consider new careers within the field of occupational health and safety and to get a taste and a better understanding of the world of work.

#### 2 Media Initiatives

#### 2.1 Participation in media events

OHS officers participate in several radio and television programmes, mostly on an *ad hoc* basis. The Authority has issued a number of press releases that dealt with specific areas of concern. There were also various letters to the editors which were sent out by the Authority. On these occasions, these have been of both a pro- active as well as a reactive nature.

#### 2.2 Relations with the media

The Authority has long felt the need to address problems encountered in its interactions with the media. In particular, the Authority feels that its role and functions are often being misrepresented, while information about the prevailing standards of occupational health and safety is not always factual. Furthermore, a number of press releases issued by OHSA over time, including those which identify unsafe work practices and which recommend the preventive and, or protective measures required to be taken, remain unreported by the media.

This has an overall damaging effect on the Authority's sound reputation and fuels the wrong perceptions amongst members of the general public. More worrying is the fact that people having legitimate demands may feel disinclined to seek approach OHSA. At the same time, OHSA's resources do not allow any sustained campaigns, necessary to highlight the statutory roles of OHSA and the parameters, legal or otherwise, within which it has to operate. For this reason, OHSA has to rely on intermittent invitations issued by media operators.

During 2012, OHSA was invited to participate on a regular basis in a morning discussion radio programme, which also provides listeners with the opportunity to phone in – OHSA's participation on this programme is guaranteed at least until the middle of next year. Also, a Sunday newspaper made available to OHSA a centre

spread for a period of around 10 weeks, providing valuable space where issues of a technical nature and guidance material could be provided to the general public. Both these regular participations were provided to OHSA at no charge.

OHSA representatives also took part in a number of other television and radio programmes, whenever invited, thus helping to maintain OHSA's presence in the media.

#### 2.3 Seminar for representatives of the media

In view of the current relations with the media, the often-repeated erroneous statements about the level of occupational health and safety standards, and the prevailing misconceptions about OHSA's activities and roles, OHSA organised a half day seminar for representatives of the media. Despite the large number of invitations issued to all television and radio stations, and all newspapers published in Malta, it was disconcerting to note that only a few invitations were accepted - in two cases, television stations sent their artistic coordinators.

During the seminar, OHSA presented an overview of all its activities, and highlighted those areas in which the Authority has no role or power to intervene. More importantly, the overall effects of such OHSA actions were illustrated.

The representatives of the media present for the seminar were also given the opportunity to present their views on how OHSA can better meet the media's expectations.

# 3 European Agency for Safety and Health and the Maltese Focal Point

OHSA-Malta, in its role of Focal Point for the European Agency for Safety and Health (EU-OSHA) participated actively in a number of activities organised by this Agency.

#### 3.1 Network visits

Acting on a suggestion made by EU-OSHA and Enterprise Europe Network, OHSA-Malta in collaboration with Malta Enterprise continued to organize further network visits to companies which accepted to take part in OHSA's initiative. The primary objectives of such visits are to bring entrepreneurs together in an informal forum and to encourage participants to share experiences and examples of good practice and learn from one another.

During 2012 one of the major companies in Malta which manufactures semiconductors and employs more than 1500 workers, ST Microelectronics (Malta) Ltd hosted such a visit which was attended by a good number of representatives from companies within the respective industrial sector, including members of management and safety officers.

#### 3.2 Good Practice Awards

During 2012 the European Agency for Safety and Health at Work launched its 11<sup>th</sup> edition of the Good Practice Awards, which for this year had as its theme 'Working together for risk prevention'. This Award was also launched in Malta by OHSA as EU-OSHA's National Focal Point. Five companies took part in the Maltese award competition and submitted 9 examples of Good Practice. The two submissions which placed in first in the two available categories (for companies employing more than, or less than 100 employees) after being judged by the local tripartite Evaluation Committee were nominated by OHSA-Malta to compete for the European Good Practice Award at a European level. The final result of this Pan- European Award will be announced by the European Agency, in April 2013.

#### 3.3 EU-Agency Focal Point meeting in Malta

On the invitation of OHSA, the European Agency for Safety and Health agreed to hold one of its focal point meetings in Malta. Such meetings are held twice a year at the Agency's headquarters in Bilbao, Spain. For the meeting in Malta, the first to be held outside of Spain, thirty focal point managers from all the Member States, EFTA countries and accession countries from the European Agency for Safety and Health at Work met in Malta and discussed various issues with the delegation from EU-OSHA led by the Agency's Director.

Participants also paid a courtesy visit to the Minister for Health, the Elderly and Community Care, who welcomed the officials to Malta and commended the Agency's constant assistance and commitment to promote a culture of risk prevention in order to improve working conditions in Europe. He said that Malta recognizes the tripartite composition of EU-OSHA and appreciates its collaborative approaches with stakeholders in the member States.

Malta values the cooperation and assistance provided by the Agency, which for a small country like Malta, assumes greater importance, in view of the ongoing research, development of information material and guidance documents that are prepared by the Agency. On the same lines, Malta also appreciates the value of the risk observatory intended to identify and/or predict the early identification of emerging risks.

The Minister highlighted the fact that large amounts of readily available information material and tools that aid compliance are on the increase and proving to be an essential tool. However there remains a perception that this information is not reaching the target audience. Although efforts to simplify the existing guidance and facilitate the process of compliance should continue, there also needs to be an analysis of why this information is not being utilised as well as it should be.

Following the organisation of this activity, and its coordination by OHSA, the Director wrote to OHSA to thank it for its services. In her correspondence, the Director of EU-OSHA stated that Malta remains one of the most active and impressive focal points in our network, demonstrating commitment to the reduction of accidents and ill-health and being a model for other States to emulate.



#### 4 Participation in Fairs and Exhibitions

During 2012, OHSA put up a number of stands during seminars and conferences related to Health and Safety, which were organized by other entities, during which a number of leaflets and other printed material related to health and safety at the place of work were distributed to the participants. A number of giveaways, made available by the European Agency for Safety and Health were also distributed.

OHSA also took part during the SME Week Fair, by putting up a stand while information related to Health and Safety at the place of work was given to visitors.

The Authority feels that participation at similar activities allows it to disseminate information to the general public visiting such fairs and in particular provides visitors with the opportunity to ask questions, even of a technical nature which are immediately answered by the OHS Officers in attendance at these activities.

#### 5 Activities to commemorate OHSA's 10<sup>th</sup> Anniversary

During the last week of January of this year, OHSA celebrated the 10<sup>th</sup> Anniversary of its establishment. Between the 23<sup>rd</sup> and the 29<sup>th</sup> of January, OHSA organized a number of activities aimed at promoting OHSA's role as an entity providing a useful service to all stakeholders and to continue raising awareness, including amongst young teenagers. For this purpose, OHSA organized two main competitions, one of which was for schoolchildren aged between 13 and 16 years of age, who had to submit photos emphasizing either the dignity or the beauty of work, or which show the harsh realities of work. The other competition was aimed at artists who were required to submit designs for OHSA's Good Practice Award.

Submissions for both competitions were adjudicated by panels which included independent experts in their respective fields.

Another activity which was held during this week consisted of a half day seminar, for which Dr Christa Sedlatschek, the Director of the European Agency for

Safety and Health at Work was the main speaker. In her presentation, the EU- Agency Director gave a brief overview of the Agency's roles and its activities in promoting examples of good practice, in carrying our research and in disseminating information. She also outlined the interactions of the Agency with its Maltese Focal Point, OHSA-Malta. At the end of the Seminar the Hon Minister for Health, the Elderly and Community Care distributed the prizes to the winners of the children's photo competition and the design of the new OHSA Good Practice Award. This seminar highlighted OHSA's international dimension and its relations and work with European institutions.

During her visit to Malta, Dr Sedlatschek commended the great commitment shown by OHSA-Malta which according to her is also extremely active and innovative in fulfilling its role.

Other activities were organized during this week, including a half-day visit to San Anton Palace for members of staff and their families. A donation towards the Malta Community Chest Fund was made on behalf of the OHSA employees. The OHS Authority also proudly welcomed HG Archbishop Paul Cremona who paid a courtesy visit to the offices of the Authority. During his visit, HG the Archbishop showed interest in, and expressed his appreciation for all the work done by the Authority's employees. A donation towards the Archbishop's welfare fund was made on behalf of OHSA employees.

#### 6 Fire Safety

Fire has the potential to destroy both the construction of the workplace as well as the lives of the workers. To prevent danger and minimize the consequences of an accident, both management and the workers should be aware of those risks that can cause fire and how to behave in case of emergency.

For this purpose, the Authority, with the help of the European Agency, organized a seminar with the theme *"II-prevenzjoni kontra n-nirien fuq iI-post tax-xogħol"*. During the seminar, representatives of public entities and private companies who supply and install fire safety devices identified a number of

problems in this area that need to be solved after which the same participants recommended a number of feasible solutions.

#### 7 Health & Safety Risks for Hairdressers

During 2012, a number of European organisations representing hairdressers ratified a Framework Agreement on the protection of the health and safety of hairdressers. The ratification and the signing of the agreement were done in the presence of Andor László, European Commissioner responsible for Employment, Social Affairs and Inclusion. As with other Framework Agreements, the one dealing with hairdressers is binding on the signatory parties, but in the case of hairdressers, the signatory parties have also requested the Commission to issue a Directive dealing specifically with this matter.

OHSA took the lead in organizing a seminar as a means of raising awareness about the risks faced by hairdressers, and to suggest possible options for prevention and control of risks. The seminar, which had the full support of the European Agency for Safety and Health at Work and the European Commission, was addressed by Mr. Guido Schwarz, Policy Officer from the European Commission and Mr. Marios Charalambous, Focal Point for Cyprus. Mr. Schwarz presented an overview of the Framework Agreement's provisions while Mr. Charalambous delivered a presentation of the Online Risk Assessment tool for Hairdressers. Practical implementation guidelines were described by a number of OHSA representatives.

## 8 Training Initiatives

In line with its business plan, the Authority retained its core training activities. The beneficiaries of these training and awareness raising sessions included construction and road-building companies, manufacturing enterprises, hotel and catering establishments, ITC sector, primary health and mental care, probation officers, teachers, union representatives and HR managers. Throughout the period under consideration, collaboration with St. John Ambulance qualified 65 First Aiders who attended OHSA's course entitled *First Aid and Safety at Work (FASW)*. Female attendance to this course was highest with more than 55% of delegates. 78 persons

participated in the 16 hour training programme for Workers' Health & Safety Representative. Despite operational and staff developmental commitments, the training function also registered an 18% increase in courses and just under 37% increase in participants.

The Radiation Protection Section gave a total of 16 hours training for industrial practices.

#### 8.1 Training for operators of Fork Lift Trucks and Cranes

OHSA has entered into discussions with the Chamber of Engineers (CoE) regarding training for forklift truck operators. It is proposed that the training course would be delivered jointly by the OHSA and the CoE. It is envisaged that the course content will encompass topics related to health and safety and the associated legal requirements besides the technical subjects of safe operation, load stability, safety devices, inspection and upkeep. The theoretical training shall also be complemented by a practical session. The trainees would be required to be examined at the end of the course to ascertain that they have understood their obligations and responsibilities and are able to operate the equipment in a safe manner. The successful trainees would be issued with a personalised card indicating that he/she has undergone training in the safe operation of forklift trucks. It is intended that this training would be valid for a period of three years, after which the trainee would be required to attend a short refresher course to renew his/her card. If this scheme is successful it is hoped that it will extended to crane operators' training as well.

#### 9 Degree-Plus – University of Malta

For the fourth consecutive year, an occupational health and safety component has been included within the Degree-Plus Programme at the University of Malta (UoM). The subject areas incorporate the work-health relationship, risk assessment, legal framework, chemicals, work equipment, ergonomics and construction safety. Practical examples form different places of work were also shared with the students. The rationale behind this initiative is to mainstream basic concepts of occupational health and safety into as many diverse undergraduate courses at the University of Malta as possible.

It is also being hoped that this initiative will continue in the years to come so as to reach the maximum number of tertiary education students as possible.

#### 10 Website – http://www.ohsa.org.mt

There was a marginal increase in the number of subscribers to the OHSA website which remains at just over 1200 subscribers. These have received a total of 16 updates to the website – a mechanism which is used to inform interested people about all new developments, including amendments to existing legislation, scheduled courses, new initiatives undertaken by the OHSA and published press releases.

This website remained popular with safety practitioners and members of the general public, and is used by more people searching for information about different aspects of occupational health and safety in Malta - the number of hits registered for 2011/2012 is at 652,256 (an average of 2,084 hits per day). There were also over 23,244 visitors (equivalent to 77 visitors per day) and a total of 28 Gb of downloads throughout the year.

In view of significant technological advancements in the world of digital media, work has been carried out to redesign and create a web presence that continues to build on the success of the previous website.

The main menu has been simplified with important areas previously available only through menus and sub menus being given more prominence as they are now assigned to large buttons available in a central location and present throughout all web pages to facilitate user navigation. The Quick Links area provides some of the most popular and sought information in a condensed structure to regular visitors to the website and newcomers alike.

Besides the Quick Links area there is a much simplified menu in the top right hand side of the website providing a number of important links such as the Home button a means to redirect the visitor back to the home page, About Us, Kid's Corner, Contact Us and the Subscribe functionality which enables visitors to receive periodical issues of the OHSA newsletter.

In adopting a new web content management system as an integral part of the new web presence, OHSA can carry out changes in a quicker and easier manner through all stages of the content delivery process thus improving both response and interaction with online visitors. A Contact Us form is now available to allow visitors to provide feedback via an online web form to OHSA. In the Contact Details section a map has been included to assist visitors to reach OHSA's offices in Pieta. New content featuring a brief history of Occupational Health and Safety in Malta has been added.

The revamped design will include the use of 'breadcrumbs' (navigational aids) to allow visitors to know exactly where they are when navigating through the website and an easy to navigate experience.

OHSA also maintains and updates the Malta portal of the European Agency for Safety and Health (http://osha.europa.eu/en), which is totally distinct from OHSA's own website. According to the Network Web Statistics Report published earlier on this year by EU-OSHA, which shows the amount of web activity of member states and focal points during 2011, access to the Maltese EU-OSHA website remains highly encouraging.



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#### 11 OHS in the public service

OHSA also maintained its initiatives targeting the public service, this time by addressing all the Directors (Corporate Services). The scope of the meeting was to continue raising awareness about the benefits of having adequate levels of ohs within the public service, and in particular to make the Directors aware of the consequences when health and safety are ignored. Information was also given about emerging risks, including work related stress, and the options available for its early identification and control.

#### 12 Pan-European opinion poll on occupational safety and health

The European Agency for Safety and Health at Work (EU-OSHA) commissioned a survey of the general public about occupational health and safety. The survey was carried out in 36 European countries (including Malta) conducting a total of 35,540 interviews between 24th October 2011 and 17th January 2012. The results of the survey were published by EU-OSHA during March 2012. 1,000 interviews were conducted by telephone with adults aged 18+ in Malta - this was a nationally representative sample with quotas set by gender, age and region.

Overall, findings from Malta suggest that:

(i) Seven in ten people in Malta expect job-related stress to increase in their country over the next five years (74%, including 46% who say it will 'increase a lot'). These results are less than the European averages (77% increase and 49% 'increase a lot').

(ii) There is strong consensus in Malta that good health and safety practices are important for the country to be economically competitive (89%, including 70% who 'strongly agree' with this view). A similar proportion across Europe hold this view (86% important), although fewer 'strongly agree' (56%).

(iii) Seven in ten workers in Malta are confident that if they brought up an issue of health or safety to their supervisor it would be addressed (72%), although a significant minority (24%) are not confident. Around half are 'very confident' that a

problem would be addressed (46%). The findings are very similar to Europe as a whole where 74% are confident and 23% not confident.

(iv) Almost two-thirds of the public in Malta feels well informed about occupational health and safety (63%), rising to eight in ten workers (80%). A significant minority say they are not very or not at all informed (27%), including almost one in five (19%) of those who are working. Again the results are similar to the European findings (67% informed vs. 27% not informed for the public). Eight in ten workers in Malta consider themselves informed (80%, including 37% 'very well informed') compared to under half of those who do not work (45%, including 14% 'very well informed'). Compared to 2009, a slightly higher proportion now feels informed about occupational health and safety (59% informed and 35% not informed in 2009) and almost twice as many now feel 'very well informed' (14% in 2009 compared to 26% in 2011).

## **B** Ensuring compliance with existing legislation

The Authority considers enforcement as one of its key core functions – the purpose of enforcement is to ensure that duty holders effectively control risks at their place of work. This can be achieved if duty holders take action commensurate with the degree of risk. When no such action is taken, it is the duty of the enforcing authority to take legal action or any other action permitted by law.

The term 'enforcement' has a wide interpretation, but is often taken to include all interactions between the enforcing authority and the duty holders, which may include employers, employees, the self-employed, appointed competent persons, workers' health and safety representatives and others. The term should not be taken to mean exclusively punitive action, as for example through prosecution, but can also mean the provision of advice or information, or the issue of a warning or an order by an OHS Officer.

It remains the Authority's current policy to focus on those work activities that give rise to the greatest risk – this effectively means that the Authority cannot satisfy all demands made for enforcement action to be taken. The Authority has also stepped up its actions related to the last step within the hierarchy of available

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enforcement actions, namely the commencement of judicial proceedings. At the same time, it is also realised that the Officers of the Authority, limited in number as they are, cannot be everywhere all the time, so the Authority periodically carries out inspection campaigns focusing on specific issues.

# 1 The introduction of pecuniary penalties within a broader enforcement framework

As of February 2012, OHSA has been applying a system whereby persons found in breach of the law are intimated of their legal failings and a fine imposed – in the case of an admission of guilt and payment of the fine, no judicial proceedings are initiated by the Authority before the Court of Judicature.

Since its introduction, a total of 232 letters have been issued, following which a good number of intimated parties opted to pay the administrative fine imposed rather then face prosecution in court (49 opting to contest the fine imposed by OHSA in Court).

This system is proving itself to be advantageous to both those who are intimated as well as to the Authority itself. The system itself includes a number of conditions which are required for the cessation of judicial proceedings – these include compliance with statutory requirements and settling of the fine. Thus the system itself is helping to bring about speedier compliance, and ensuring workers' protection. Furthermore, and before the introduction of the system, all the directors of any particular company would have been required to appear in court in person and answer to the charges preferred against them in view of the vicarious liability (with the possible consequence of being found guilty and a pecuniary penalty imposed on each and every one of them); through the introduction of the administrative fine system, it was the company thus intimated, which has the opportunity of taking steps to immediately adhere to the legislation and settle such fine. This measure alone removed the burden of seeking legal representation and defending its case in court.

The need to introduce and implement this administrative fine system had long been felt, lifting an enormous workload from the judicial courts and the executive police.

It is appropriate to mention that whereas the Act requires payment of a fine within 15 days, OHSA, through an administrative decision accepts a longer time frame before referring the case to the Courts. A number of persons requested, and were granted authorization to pay imposed administrative fine in installments within an agreed time frame.

The introduction and implementation of the administrative system presented OHSA with number of challenges. As a matter of urgency, a Standard Operating Procedure was drawn up so that the system is applied uniformly and in an equitable way by OHS Officers. To avoid unnecessary paperwork, an electronic system was created, to which only a limited number of personnel have access or viewing rights. To avoid an excessive handling of cash, the option of paying a fine through internet banking has also been provided.

The introduction of the administrative fine system has relieved a considerable amount of back log in cases to be appointed before the Judicial Courts. The system has also been introduced in line with the basic observance of the rule of law, whereby anyone who does not agree to such fine, may have the option of not paying and the case heard by an independent member of the court, presided by the sitting Magistrate.

Since the introduction of the administrative fines system, OHSA's allocation of Court sittings during the year was reduced to four (two in Malta and two in Gozo).

#### 2 Handling of requests for assistance or information

OHSA has set itself a target whereby all requests for assistance or information are handled within a maximum of two working days. In those cases necessitating a workplace visit, OHSA has managed to meet this target 98% of the time. There has also been a marked increase in the use of electronic mail – over 970 have been received during 2012. Invariably, the information requested was supplied by OHSA on the same day that it was received; other more complex requests were handled within a maximum of two days.

This approach has led to a situation whereby there remains no pending workload in this regard.

#### 3 Inspection campaigns

#### 3.1 Hairdressing sector

During 2012, the OHS Authority continued its preparations for a proactive inspection campaign targeting the hairdressing sector. Whereas the primary scope of this campaign would be the provision of information and guidance to a representative proportion of operators within this sector, the visits by OHS officers will also focus on ensuring general compliance. As in previous years, those constituted bodies representing operators within this sector will be informed beforehand of the general scope and objectives of the campaign whilst soliciting their cooperation to inform their members that they should expect a visit by OHS Officers will also look for the presence of uncontrolled risks arising from exposure to dangerous chemicals, inadequate ventilation, and prolonged hours of work and standing. The campaign will also target the protection of the unborn child and/or breastfeeding mothers working in this sector.

#### 3.2 Proactive workplace visits

With respect to proactive, planned workplace visits, OHSA continued inspecting medium-sized and large manufacturing enterprises - around 164 companies were visited, more than twice the number visited in the preceding year. OHS Officers revisited those enterprises which had already been visited previously, to ensure that the level of compliance achieved following their earlier visit, remained high.

Despite the fact that the majority of such follow-up inspections were unannounced, a general acceptable level of compliance was still observed. It is also satisfying to highlight the active and participative role of the workers' Health and Safety Representatives, which increasingly is seen as an opportunity to improve prevailing standards of occupational health and safety through participatory means.

#### 4 Accident Notifications and Investigations

OHSA received 541 accident notifications from employers concerning injuries which result in the utilisation of three or more days of sick leave. The law also requires the OHSA to be notified if a worker is hospitalised for more then 24hours beyond the period for observation.

## 5 Construction Notification Forms

OHSA processed 408 Construction Notification Forms received in accordance with Legal Notice 281 of 2004, which is markedly higher than the number received in the preceding year. The sharp increase came about following intense promotion on the media, especially radio and television.

OHSA notes a higher adherence rate by developers ('clients' in terms of the relevant legal notice) in Gozo.

These Construction Notification Forms are required to be sent to OHSA in the case of projects of a considerable size and which entail more than 500 man days or where there are more then 20 workers working on any one particular site for more than 30 days. Every Notification Form triggers an onsite inspection to ensure compliance with the regulations.



# 6 The Construction Sector

In view of the prevailing widespread hazards and risks, the construction industry remains a focus of attention for the OHS Authority. Apart from the periodical proactive campaigns, OHS Officers regularly visit construction sites and take appropriate action

during 2012, OHSA carried out 1616
construction site visits, including several which
identified a number of serious shortcomings.

These irregularities clearly show that despite OHSA's continued commitment and whilst devoting a substantial amount of human resources to this particular sector, there still remain a number of contractors as well as a small number of workers who continue to ignore regulations and take

shortcuts – according to OHSA's Enforcement Policy, judicial proceedings are immediately initiated against such 'repeat offenders' without giving them the option of paying an administrative fine. In every instance whereby judicial action was taken, a conviction was secured. On a positive note it is reassuring to see that the larger contractors have come round to understand the benefit of maintaining adequate standards of occupational health and safety, and are showing tangible commitment and investment, so that large projects are no longer



associated with high accident rates, despite their long duration and the large number of workers present at any time on site.

# 7 Radiation Protection

The EURATOM Treaty of the European Union provides the regulatory framework for all EU states with regard to ionizing radiation protection and nuclear issues. All regulatory aspects of the EURATOM Treaty fall under the remit of the interministerial Radiation Protection Board (RPB) set up by Legal Notice 44 of 2003. The work of the RPB is not limited to occupational radiation issues but also covers a vast range of other issues including medical radiation exposure control, radiological emergency preparedness, protection of the environment from radiation sources and Maltese obligations under the nuclear related treaties. OHSA is the lead entity in RPB, providing not only administrative support, but also coordinating the activities of the constituent entities. Four formal RPB meetings were held during the period 1<sup>st</sup> November 2011 to end of December 2012.

The inspections performed are focused to ensure that any new or modified facilities are in line with occupational and medical radiation protection regulations.

The national inventory of users of all sources of ionizing radiation is maintained by the RPB continues to increase each year – currently it stands at 210 users (16 more users than in the last report).



Further to its conclusion of its master radiological emergency plan in 2010 RPB is working with Health Care Services with regards to its radiological emergency plans for persons who need medical treatment and who may have been exposed to ionising radiation.

The RPB drew up a plan involving the RPB, Civil Protection Department and the Armed Forces of Malta to recover a

radioactive source which had been buried for a period of years. This operation which was performed at the start of December 2012 led to the radioactive source being excavated, packaged and transported to a new secure location. This operation was a good example of how the RPB can coordinate and advice other governmental entities on issues relating to radiation protection.

Following the substantial extensive consultations, the revised Medical Exposure Regulations and Guidelines were issued in October 2012. The new regulations are intended to provide a better framework for the regulation of the protection of patients undergoing any exposures to ionising radiation.

The RPB review of the existing National Environment Radioactive Surveillance Plan continues and will take into account lessons learnt from the Fukushima accident on the 11<sup>th</sup> March 2011.

During 2012, RPB has been working on a national programme for the management of radioactive waste. Regulations are being drafted to transpose Malta's obligations according to the EU Directive on radioactive waste as well as an International Atomic Energy Agency (IAEA) Convention on waste management. In connection with radioactive waste management, RPB arranged for experts from the IAEA to run a national workshop in Malta in August 2012.

There was significant collaboration with the Maltese Customs Department and the United States Mega-Ports team to get the radiation monitoring equipment at the Freeport operational. RPB was instrumental in the setting up of the standard operating procedures for the use of the equipment and can be called upon for advice as necessary.

## 8 Machinery, Equipment, Plant and Installations

All sectors within industry make use of some kind of equipment or machinery. There are various occupational health and safety regulations that were implemented to guide employers and ensure that all equipment is safe for use. Certain regulations require specific equipment to be examined and tested by competent persons at predetermined time intervals. Other work equipment must be inspected and certified at appropriate intervals as determined by the competent person. For certain types of equipment, employers are required to send a copy of the examination report to the OHSA.

The Machinery Equipment Plant and Installation section at OHSA receives and maintains a database of these reports, which once received, are acknowledged and vetted by the section's Officers. They are also compared to the previous report to check if there are any recurring faults. If this is the case, the employer is contacted to rectify the faults within a specified time period, depending on the severity of the identified fault and the resultant risk. When the report outlines serious deficiencies that concern the safety of the equipment, an order to stop using the



item of equipment is invariably issued. Such an order is only revoked once the necessary repairs or modifications are carried out.

Between November 2011 and December 2012, the number of entries related to the various types of machinery and equipment in the database was 6157. These include 2934 lifts, 786 cranes, 428 boilers, 960 forklift trucks, and 1049 other equipment. The number of reports received totalled 7286, 5231 for lifts, 316 for cranes, 148 for boilers, 513 for forklift trucks and 1078 for other equipment.

Officers from this section respond to complaints received by the Authority which are related to work equipment. These are mostly related to cranes and lifts. The Officers investigate all complaints and ensure that the equipment is covered by the required certification and is safe for use. They are also involved in accident investigations where machinery is involved. Equipment which does not comply with the provisions of the regulations is not allowed to operate.

The discussions within the European Council on two new Directives, the Seveso III Directive, and the Electromagnetic Fields Directive (EMF) continued during this period. Negotiations concerning the Seveso III Directive were successfully concluded and the Directive was published in the Official Journal in July 2012. This has to be transposed into local legislation by the 1<sup>st</sup> June 2015. Talks on the EMF Directive should be concluded shortly. OHSA is in consultation with the Department of Physics at the University of Malta regarding collaboration in training and implementation of the EMF Directive.

The Control of Major Accident Hazards (COMAH) Regulations Competent Authority (CA) oversees and enforces the implementation of these regulations. OHSA forms part of the CA together with MEPA and CPD. Since OHSA is the lead Authority within the CA, it coordinates the inspections and prepares all reports and correspondence to the operators. In July 2012 the upper tier Qajjenza LPG plant ceased to operate and the new facility at Bengħisa started operations. The plant in Qajjenza posed a major hazard due to its close proximity to the nearby residential area. OHSA engaged the services of a foreign consultant to evaluate the safety report of the new LPG facility and a site visit was conducted in October. In line with the provisions of the COMAH regulations, all COMAH establishments were inspected and two emergency exercises were held during the current year.

OHSA officials held talks with MEPA and other entities regarding the implementation of the Land Use Planning (LUP) article in the Seveso Directive. MEPA tabled new proposals on the procedure to be adopted for applications for new COMAH sites and modifications to existing ones. OHSA contacted the Major Accident Hazards Bureau of the European Commission for any assistance they could offer to set up an operational system that would cater for the local scenario.

The officers of this section are actively involved in the Health, Safety and Welfare Committee of the OHSA. They contributed to the revision of the Authority's Safety Policy, ensure that fire extinguishers are regularly serviced and safety signs are in place. The Committee also drafted an Emergency Card and Instructions for Visitors. The MEPI section also prepared press releases related to the safe use of cranes and revised the information leaflets on forklift trucks, manual handling and cranes.

#### 9 Occupational Health

Occupational ill health contributes greatly to the social harm and cost caused by poor OHS standards. However the possible subjects for attention are so wide ranging that prioritisation is essential. OHSA is in favour of developing a more targeted, group specific approach with a focus on those cases of work-related ill health and disease, which are the most common reasons for working days lost and early retirement. Where relevant, this approach should take into account the multi- factorial causes, for such cases as work-related psychosocial ill health. It is therefore imperative that there should be new instruments and tools to effectively address workrelated, but multifaceted health and safety problems.

#### 9.1 Work related stress

Work-related stress has been identified as a concern for both employers and workers. It can potentially affect any workplace and any worker, irrespective of the size of the company, field of activity, or form of employment contract or relationship. Conversely, tackling stress at work can lead to greater efficiency and improved occupational health and safety, with consequent economic and social benefits for companies, workers and society as a whole.

With this in mind, OHSA prepared a document outlining the various steps that are required to be taken as would allow the implementation of the European Framework Agreement on Work Related Stress. This document, which has been discussed and endorsed by the social partners represented in the Authority, provides all social partners in Malta with an opportunity to recognise the urgent need to be proactive in this field, and to promote and ensure that are taken a number of preventive and protective measures. The document lays out a model policy that can be promoted at all workplaces - the aims of this policy are to establish an effective and consistent approach to the prevention of work-related stress throughout companies in Malta and to provide support where cases of stress are identified.

It is the intention of OHSA to issue the document for further consultation, and once feedback is received, will give it wide publicity and promotion.

#### 9.2 Health Surveillance

Health surveillance is a process involving a range of strategies and methods by which to systematically detect and assess the early signs of adverse effects on the health of workers exposed to certain health hazards - in other words, health surveillance means watching out for early signs of work-related ill health in employees exposed to certain health risks. It is an important tool, and when used as part of an appropriate risk assessment process, serves to determine the adequacy of preventive and protective measures, or to indicate the need for new ones.

This year the OHSA has cooperated with the Ministry for Resources and Rural Affairs to set up a National Action Plan for the Sustainable Use of Pesticides in order to safeguard the safety and health of pesticide workers. This document should include guidance on health surveillance of pesticide workers.

#### 9.3 Notification of Industrial Diseases

The notification of all industrial diseases is important not just from a statistical point of view, but would be of assistance to the Authority to identify areas where greater intervention is required. Having worked with the Social Security Division in developing one single form which can be used to file a claim for a benefit under the Social Security Claim, as well as to notify the Authority of the occurrence or suspected occurrence of a disease that has been caused by work, OHSA continued with its ongoing drive to increase the notification rate for such occurrences. This information would be of great assistance to OHSA in its task of identifying uncontrolled risks at different places of work. The most severe cases are investigated by OHSA and steps are taken to ensure compliance by whosoever has

such a duty in terms of the law. This is of benefit to the workers concerned, not only to avoid recurrence of any similar occurrence, but also to reduce the risks to other workers. This ultimately also reduces the burden on the social security system and society in general.

At the European level, the Authority continues to participate in a Working Party set up by the Advisory Committee for Safety and Health (ACSH), which is to assist the Commission in the development of new Community initiatives on Occupational diseases at a European level. A 'Report on the current situation in relation to occupational diseases systems in EU Member States and EFTA/EEA countries' has been concluded, in July 2012. This report will also look at the implementation of Commission Recommendation 2003/670/EC concerning the European Schedule of Occupational Diseases. The report acknowledges the fact that Malta's list of occupational diseases compares favourably with the European list albeit there is still the need for minor adjustments to the list. The report also acknowledges the problem of under-reporting of occupational diseases in all countries, including Malta – several possible reasons are given, including the lack of awareness and knowledge amongst doctors, and the presence of legal consequences for the employer should a work related disease come to light. The report suggests that Member States should ensure that all cases of occupational diseases are reported and progressively make their statistics on occupational diseases compatible with the European schedule of occupational diseases, in accordance with the work being done on the system of harmonising European statistics on occupational diseases. This would include data and information on the causative agent or factor, the medical diagnosis and the sex of the patient.

0.0		REPORT
SIGURTA	Occupational	of Disease / Medical Condition related to work
Ordnance Steet, Valletta VLT2000	Health and Safety Authority	and APPLICATION for Benefit
Tel: 2590 3000 Fax: 2590 3001 e-mail: social.security@gov.mt sbeite: www.socialsecurity.gov.mt	17, Edgar Ferro Street, Pietà, PTA1530 Tel: 2124 7677-8 Fax: 2123 2909 email: obsa@dov.mt	Application received at this office on
(Social Policy information Centre) Tel: 159	Website: http://www.obsa.org.mt	M / REPORT
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[A] Purpose of this for:     Claim for Injury Benefit     Claim for Injury Grant /     Work related Disease /	Y THE PERSON MAKING THE CLAI Tick (*) as applicable: due to Disease / Medical Condition to the Pension due to Disease / Medical Conditi	Department of Social Security. on to the Department of Social Security. nal Health and Safety Authority.

### 10 Work related accidents - statistical trends

Statistics about work related accidents, including injuries, fatalities and illhealth remain an important tool to assess the current state of occupational health and safety especially the effectiveness of current measures. Locally, these statistics are obtained from various Government entities including the Occupational Health and Safety Authority, the National Statistics Office as well as the Department for Social Security.

The downward trends in both the number and more significantly, the rate of industrial injuries (for which a claim for a benefit under the Social Security Act has been filed), remain evident. Whereas it can be argued that there are a number of injuries which are not notified and which therefore are not included in the official statistics on work related injuries, on the other hand it can also be assumed (in the worst possible scenario) that this number remains constant throughout the years. From a statistical point of view, this does not affect trends, and so the claim that there is a downward trend in work related injuries remains valid.

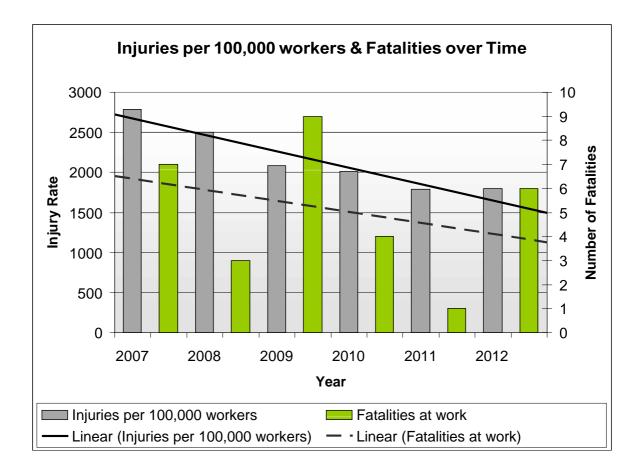
The 2012 figures with regards to injuries at work refer to gross data published by the National Statistics Office. These figures are revised by NSO during the following year to take account of double entries and claims which are shown to be not related to any work activity – the correct, revised number of claims for 2012 will be included in the 2013 report.

	Employed population <sup>1</sup>	Injuries at work²	Injuries per 100,000 workers	Fatalities at work <sup>3</sup>
2007	155,515	4,328	2,783	7
2008	160,979	4,023	2,499	3
2009	161,850	3,366	2,079	9
2010	164,347	3,314	2,016	4
2011	168,730	3,024 (revised)	1,792	1
2012	172,000 <sup>4</sup>	3000 (unrevised)	1,744 <sup>4</sup>	6

The following table shows a comparative overview of the basic statistical trends over the past years:

(1) Source: NSO, (2) Source: DSS / NSO, (3) Source: OHSA, (4) Estimate.

During the period October 2011 – December 2012, 6 fatal accidents at work were recorded, all of which were the subject of a magisterial inquiry while an OHSA investigation was carried out in terms of article 9 (2) (j) of the Act.



## 11 Prosecutions conducted by OHSA

Judicial prosecutions continue to be carried out by the Authority mainly before the Court of Criminal Judicature. OHSA, in collaboration with the Executive Police, also prosecutes in a number of cases heard by Courts of Criminal Inquiry. In such situations, charges against breaches of the OHSA Act, 2000 are combined with charges of breaches against the various provisions of Chapter 9 of the Criminal Code. Such cases also require regular Court attendance by OHSA officials.

During 2012, the Authority prosecuted in a total of 118 criminal cases, of which 48 cases involved the compilation of evidence before the Courts of Criminal Inquiry, whilst 70 cases were appointed before the Court of Magistrates acting as a Court of Judicature. Of these, 49 were decided whilst a substantial number remain '*sub-judice*'. Other cases which are still being investigated by OHSA, and in which judicial proceedings may be instigated, are not included in these figures.

The Courts imposed a total of €42,000 in fines. In addition OHSA has appeared in a number of appeals, which were lodged either by OHSA, or by the aggrieved parties.

Furthermore, OHS Officers were summoned to testify in twelve civil cases initiated by the injured parties seeking compensation from their employers or insurance companies.

#### 12 DSS investigations.

OHSA has received a number of claims for benefits in terms of the Social Security Act, to be investigated according to a memorandum of understanding signed by the Department of Social Security and OHSA. The latter has the task of investigating the alleged accident to determine whether the accident was truly work related, or to determine negligence. These referred claims are thoroughly investigated by OHS Officers, who interview both the injured party as well as the employer, and draw up a comprehensive report which is sent to the Department of Social Security.

# 13 MicroInvest: Tax Credits for Micro Enterprises and the Self Employed

During 2012 Malta Enterprise continued to run its MicroInvest scheme which is aimed at encouraging micro enterprises and self employed persons to invest in their business, to innovate, expand, and implement compliance with directives and/or to develop their operations. Through this scheme, micro-enterprises and self- employed persons are being supported through a tax credit representing a percentage of the eligible expenditure and wages of newly recruited employees and, or apprentices.

OHSA supported Malta Enterprise during the launch of this scheme and had issued a promotional flyer to promote this scheme and suggested a number of possible actions, related to improvements in OHS that may be proposed by applicants. Unfortunately, it has not been possible to gauge the uptake within this initiative specifically for improvements in health and safety, since the information available to, and the classification used by ME is restricted to the cost of investment and the cost of wages, and does not make reference to any specific measures implemented.

#### 14 IPPC

The Integrated Pollution Prevention and Control Committee also known as the IPPC Committee established by virtue of LN 234 of 2002 of the Environment Act as amended by LN 230 of 2004 and LN 56 of 2008 is chaired by the Director for Environment Protection within MEPA. The committee oversees the definitive establishment of IPPC installations, the inspection of installations and ensures compliance with the necessary legal requirements. The ultimate aim of the IPPC is to minimise pollution from various point sources. All installations falling under the relevant legal notice are required to obtain a prior authorisation (permit) from MEPA. As Integrated Pollution Prevention is a multi-disciplinary task a Committee to deal with the regulatory aspect of the Regulations has been set up. Installations that fall under the IPPC are either existing or new installations. Sites that are classified as IPPC installations come from the waste management sector, power generation, certain chemical plants and farms. The integrated aspects mean that the permits must take into account the whole environmental performance of the installation. The IPPC legislation is expected to be replaced in the near future with a new Industrial Emissions Directive which will be transposed into national law.

In their application for an IPPC permit, establishments have to submit a standard form to MEPA. In this application, they must submit a description of their proposed activities, provide details of how the site will be managed, nominate a technically competent person, indicate the potential for releases of emissions and waste generation and how these will be minimised and monitored, specify the raw materials, water and energy use of the activity and how resources will be used efficiently and indicate how the site will be returned to a satisfactory site after operations cease.

Once the application is submitted to MEPA it is assessed by the IPPC Committee. OHSA responds to the documentation in view of occupational health

and safety requirements, especially with regards to COMAH sites. During 2012, OHSA was involved in the IPPC process as 17 establishments required intervention by the IPPC committee. These included existing power generation sites, production of acetylene facility, baling plant and end-of-life vehicle facility, storage and processing of oily waste mixtures facility, extension to a power generation plant, biomedical and hazardous waste incineration facility, storage and treatment of hazardous waste facility, production of bio-diesel facility, operation of a waste management facility, processing of hazardous waste site, sites for the production of active pharmaceutical ingredients and two non hazardous waste landfill sites.

#### 15 The presence of asbestos at workplaces – LN 323 of 2006

It is relatively well known that small quantities of asbestos fibres are present in air at all times, and are inhaled by many without any ill effects. Most people are exposed to very small amounts of asbestos as they go about their daily lives and do not develop asbestos-related health problems. It is not uncommon to identify asbestos products at home or the workplace – this does not automatically mean a person's health is at risk. Studies have shown that these products, if in sound condition and left undisturbed, do not pose any significant health risks.

People who have suffered health effects from exposure to asbestos have generally worked in either the asbestos mining or manufacturing industry, or in the maintenance and removal of asbestos products, or are from the immediate families of these people. In all of these situations there was exposure to high levels of airborne dust, from either the processes involved or from the clothes of the workers, for a prolonged period of time.

Legal Notice 323 of 2006 is intended to protect workers that are exposed to asbestos in the course of their work such as when maintenance or removal of asbestos containing material is being carried out at the place of work. In most member states including Malta once an asbestos containing material removal project is carried out as part of clearance procedures required, air samples resulting in concentrations below 0.01 fibres/cm<sup>3</sup> indicate that the site is fit for re-occupation.

It is important to highlight that occupational health and safety legislation does not require an employer to remove asbestos at the place of work. LN323 of 2006 requires that in the case of any activity likely to involve a risk of exposure to dust arising from asbestos or materials containing asbestos, this risk must be assessed in such a way as to determine the nature and degree of the workers' exposure to dust arising from asbestos or materials containing asbestos. OHS legislation also requires an employer to make available all documentation on any matter that may affect the workers' health and safety. The relevant regulations also give the right to workers of being consulted through their health and safety representatives appointed according to the General Provisions at Work Places Regulations. On this matter, such workers should make full of their right and seek to obtain copies, if these have not been made available, of all analysis, measurements and assessments.

Since the introduction of specific regulations namely LN123 of 2003, repealed in 2006 and replaced with LN323 of 2006 to protect workers from the risks related to exposure to asbestos at work, asbestos removal projects have been submitted through the notification procedure as administered by OHSA in compliance to Regulation 4 of LN323 of 2006. When Regulation 4 is not applicable to an asbestos removal project, documentation is submitted as per requirements of Regulation 11 of same legislation. Eight asbestos removal projects have been submitted in 2012. Asbestos removal sites included various forms of asbestos containing materials such as corrugated asbestos cement, drain pipes, asbestos containing soffit tiles, asbestos containing lagging and gasket material. Documentation to carry out asbestos removal was submitted for an unused power generation site, large warehouses and historical sites. When submitting documentation according to requirements of Regulation 4 the employer has to include a duly complete Asbestos Notification Form as provided at OHSA website together with the Plan of Work as per Regulation 11 of LN 323 of 2006. The employer is also expected to carry out a complete risk assessment, provide correspondence indicating that client has entrusted employer to carry out the specific asbestos removal project and valid MEPA documentation for the disposal of Asbestos containing waste. The employer is expected to have in hand evidence of information of workers as per regulation 13, evidence of training of workers as per regulation 16 and subject to Regulation 4,

satisfy health surveillance requirements as per Regulation 14 and maintain a Health Register as per Regulation 15.

#### C Legislative Reform

The legislative framework for the promotion and protection of occupational health and safety is continuously evolving, and reflects emerging trends, risks and technological innovation. Since Malta's accession to the European Union, the Authority has continued the exercise of harmonization of all new occupational health and safety legislation, while at the same time reviewing existing legislation to ensure that there are no regulatory gaps, and to identify any conflicting or burdensome legislation, with the scope of simplifying it.

The Radiation Protection Board has been involved in ensuring the transposition of European Union commitments derived from the EURATOM Treaty as well as Malta's commitments to the International Atomic Energy Agency (IAEA). As part of these commitments, the RPB continues to prepare legal notices as would allow Malta to join the Joint Convention on the Safety of Spent Fuel Management and on the Safety of Radioactive Waste Management, and the Amendments to the Convention on the Physical Protection of Nuclear Material. Legal notice 299 of 2011 was issued for the transposition of the Directive establishing a Community framework for nuclear safety of nuclear installations.

Following extensive constructive discussions with the Superintendent of Public Health and a second round of consultation with stakeholders concerning the Medical Exposure Regulations, final revised draft regulations and guidelines to the regulations have been prepared.

OHSA was actively involved in discussions at the European Council on two new Directives, the Seveso III Directive and the Electromagnetic Fields Directive (EMF) in the provision of feedback and recommendations to be included in the instruction notes for the officials attending the Council meetings in Brussels. An OHSA official also attended a meeting of the Social Questions Working Party (SQWP) on EMF in Brussels. The negotiations on the Seveso III Directive were successfully concluded and it was published in the Official Journal in July 2012. This has to be transposed into local legislation by the 1<sup>st</sup> June 2015. Talks on the EMF Directive are still ongoing but they should be concluded in the near future. The OHSA is in consultation with the Department of Physics at the University of Malta regarding research on the effect of this Directive on local industry, collaboration in training of OHS officers to be able to implement this Directive and possible assistance to industry to comply with the provisions of the Directive. Officials from the OHSA appeared before the Social Affairs Committee which was investigating the effects of mobile phone antennae on the public. OHSA held meetings with the local mobile phone providers to ensure that all measures were being taken to safeguard the health and safety of their employees and third parties.

High level talks with MEPA and other entities were initiated this year regarding the implementation of the Land Use Planning (LUP) article in the Seveso Directive. This article will be transposed into the new Control of Major Accident Hazards (COMAH) Regulations. Proposals were set forward by MEPA on the procedure to be adopted for applications for new COMAH sites and modifications to existing ones. These include the preparation of consultation zones by the applicant and verification of these zones by the COMAH Competent Authority (CA). The consultation zones will then influence whether a permit for a new COMAH site or modifications of an existing one, would be issued. They also affect the development of other buildings which lie within them according to criteria which determine what type of development is allowed within each zone. This process also involves public consultations as required by the Aarhus Convention and the new Seveso III Directive. OHSA is currently in contact with the Major Accident Hazards Bureau of the European Commission for possible assistance and training in carrying out risk analysis and preparation of consultation zones for COMAH sites using the software tool ARIPAR. This tool was developed by MAHB. It is envisaged that a case study will be carried out jointly with MAHB on one of the local COMAH sites.

# 1 Reduction of administrative burdens – Better Regulation Initiatives

OHSA continued with its participation in an initiative by the Management Efficiency Unit (MEU) to reduce administrative burdens specifically by reviewing a

number of OHS regulations to ensure that these create no unnecessary burdens on their operation.

During the reference period, MEU presented OHSA with the draft findings of an exercise it conducted as part of an EU funded project (ESF 4.87 – Developing the Maltese Public Sector's Capacity to Implement Better Regulation), through which the identification of a number of burdensome clauses in local regulations across different Ministries took place.

This year, the BRU has prepared a draft report highlighting the 'Administrative Burden Measurement and Simplification Proposals' on a number of regulations falling within the remit of the OHSA (draft, January 2012) which was discussed with OHSA. In this report the BRU identified 117 information obligations (IOs) (falling under the OHS Authority Act) and the various subsidiary legislations coming under it.

Following this report, OHSA has drafted and proposed an amendment to Regulation 9 (15) of the Workplace (Minimum Health and Safety Requirements) Regulations of 2002, which require fire drills for all places of work to be carried out as often as indicated by the Civil Protection Directorate taking due consideration of the fire risks within any particular workplace and its occupancy. These regulations determine that drills are carried out at least once every six months, and a record kept of these drills.

The obligation to hold fire drills at regular intervals is one of the measures required to be taken to protect workers (and other occupants) from the risks of fire – in this case, this particular requirement is intended to ensure emergency preparedness and therefore limit the extent of harm.

Through this amendment, and whereas the normal frequency for the organisation of fire drills remains every six months, the employer, in consultation with the Workers Health and Safety Representatives, may seek the advice of a person competent in fire safety, and who is recognised as such by the Department for Civil Protection. In suggesting a different frequency, the competent person needs to analyse the prevailing fire risks and the occupancy of that specific place of work.

In any case, the frequency of the fire drills cannot be longer than once every twelve months.

This amendment is intended to reduce unnecessary bureaucratic or administrative burdens, without in any way leading to a reduction in the prevailing standards of occupational health and safety.

OHSA has also noticed that the conditions of employment of pregnant workers are subject to different regulations issued under different Acts, creating an anomalous situation which can give rise to litigation in the Courts. This came about because when Legal Notice 92 of 2000 (the Protection of Maternity at Work Places Regulations, 2000) was published, there existed no specific provisions in the existing Maltese legislation that dealt with the conditions of employment of pregnant workers or workers who had recently given birth (and, or were breastfeeding). Thus the regulations intended to transpose Council Directive 92/85/EEC on the introduction of measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breastfeeding, also had to include such provisions, including also employment definitions.

Subsequent regulations issued under the Employment and Industrial Regulation Act, included definitions on conditions of employment which are different from those defined under the OHS Authority Act.

With the amendment to these OHS regulations, there will be only one set of definitions for conditions of employment, as regulated by the Employment and Industrial Regulation Act. This will eliminate any risk of multiple interpretations and therefore litigation. As is the custom with all other occupational health and safety regulations, these regulations also include provisions concerning the onus of proof.

All draft regulations prepared by OHSA are discussed by the tripartite OHS Authority and are also subjected to a wide consultation process.

#### D Consolidating the Authority's Resources

The Authority continued working on the development of professional competence for its technical staff, who all continued to receive training, and kept abreast of all legislative and technical developments in this field. The support members of staff also received appropriate training.

The OHSA recognizes the need to have technical people who are competent in a generalist way to act as OHS Officers, as well as others trained to a high degree of specialisation in specific areas (e.g. ionising and optical radiation protection, the implementation of the Seveso II Directives and the safety of chemical and biological agents).

Furthermore, the Authority continued to operate a Human Resource Management System which when implemented in its entirety is expected to better service emerging HR requirements, in particular implementation of family friendly and other measures.

Towards the end of the period under review, the OHSA had two departmental tenders being evaluated. These tenders, published by the Central Procurement and Supplies Section at MHEC in 2012, relate to the provision of legal services and another for the provision of accountancy services. The tender for legal services was the subject of an appeal, which was found against the appellant. The findings of the Public Contracts Review Board (PCRB) concurred with the contracting authority's approach, and confirmed the cancellation of the tender by OHSA. PCRB also put forth a recommendation for the tender to be reissued. The call for accountancy services is at an advanced evaluation stage. The assistance of the MFEI, particularly the Department of Contracts and the Financial Management and Control Unit (FMCU) within the line ministry was employed in the preparatory stages leading to the issue of both tenders.

#### 1 Staff Development

During the period under review, OHSA recorded a 12% increase in the total contact hours for the training and development of its staff. This included the participation of its delegate on a training course for HR Officers on Psychosocial and Disability Issues at Work, as part of the Employee Support Programme for Public

Employees (ESF 4.97). The direct beneficiaries of the aggregate amount were sixteen members of staff, more than double the amount in the previous year. Where relevant, the experience was cascaded to other employees. A number of OHSA employees attended conferences and seminars organised overseas and locally covering a wide spectrum of OHS areas, including occupational diseases, handling of dangerous substances, the prevention of industrial accidents, well being at work, and the safety of radioactive materials, as well as dealing with the development of organisational skills.

Staff development encompasses the Life-long Learning strategy which the OHSA implements so that while continuing educating and training the public, its officers and support staff continue to develop further their knowledge and skills on various aspects in the domain of occupational health and safety and management.

As described elsewhere in this document, the Authority is in the advanced stages of f submitting an ESF funded project to further develop its technical staff.

#### 2 Recruitment

Up to the end of 2012, the total human resource complement stood at 26. The Authority's present complement includes nine persons in professional and middle management grades whilst six other officers make up a pool of generalist inspectors, all of whom are actively engaged in the OHSA's core operations. In all 13 competent persons are engaged in inspection activities – this number constitutes a healthy mix of generalist inspectors and highly technical personnel, specialised in specific areas. Although the Authority closed off 2011 with eight clerical and industrial staff, in March of 2012 it lost one of two members of staff on loan from Industrial Projects and Services Ltd (IPSL), following the employee's voluntary redeployment to a government department. Two calls for expression of interest within IPSL did not yield the desired results. OHSA's top management team is made up of the CEO, the Head of Technical Operations and the Senior Manager (Corporate Services).

Contrary to other years, the OHSA did not benefit from deployment of participants from the ETC's Office Procedures Traineeship Scheme, however it

engaged an ICT University student through the Student Placement Programme for the duration of 312 hours. Another source of support staff which also adds an element of cultural diversity during the period under review included a Spanish participant from EU student exchange programmes. Implementation of family- friendly measures, tough as they might be to implement considering the size of the organization, consisted amongst others of maternity leave, parental leave, career breaks, reduced hours, urgent leave and bereavement leave.

#### 3 Internal Industrial Relations

OHSA's 3-year Collective Agreement expired at the end of 2010. During the 3rd and 4th quarter of 2012, the number of joint meetings held with the Union representing the majority of employees at OHSA, the Public Administration Collective Bargaining Unit (PACBU), representatives of the line Ministry (MHEC) and the Authority, to agree on a new agreement was intensified.

Team work, flexibility and healthy industrial relations within the Authority have always helped to ensure that a number of strategic objectives be reached, while others are now close to being achieved. This same framework has made it possible to implement work plans based on SMART (Specific-Measurable-Achievable- Realistic-Time) objectives whilst motivating staff towards continuous improvement and higher and better achievements. An employee handbook completed during the previous period which incorporates a number of H.R. policies as well as Standard Operational Procedures (SOP) covering both administrative and enforcement aspects will be launched after the finalisation of OHSA's collective agreement and in full consultation with the workers. Negotiations were finalised towards the end of the last quarter of 2012 and the Agreement signed on the 5th of December.

#### 4 Use of Premises

The Authority tries to maximize the use of its premises – apart from welcoming participants at public courses, the premises are regularly visited by a large number of visitors, including young persons meeting officers and seeking information and data for research purposes and well as advice. A number of information visits on the OHSA's role, facilitated by management, are held for ETC's

clients seeking employment or re-integration into the labour market. It may be pointed out that besides being the operational base for all OHSA staff; these premises house the offices for the Radiation Protection Board as well as the National Focal Point for the European Agency for Safety and Health at Work.

Considering the nature of its operations, particularly the regulatory aspect, OHSA maintained the security levels at its premises during and after office hours. *Ad hoc* emergency evacuation drills are conducted periodically to maintain a state of readiness in emergency situations.

#### 5 Equal Opportunities and Gender mainstreaming

The Occupational Health & Safety Authority recognises the changes taking place in society, in particular the increasing female presence and participation, and of persons with special needs in gainful employment. OHSA strives to effectively include gender mainstreaming and equal opportunities in its employment policies and activities as OHS regulator. OHSA attempts to combat gender segregation by discarding the 'gender neutral approach' where possible and including the gender dimension (and other non-discrimination grounds) into risk evaluation and prevention measures so as to account for specific characteristics of women and other vulnerable groups in terms of workplace health and safety. Awareness raising initiatives include the dissemination of information. This same approach is mirrored in policies such as its own Collective Agreement, Standard Operating Procedures and periodic Memos. OHSA kept up regular maintenance throughout its premises in order to mitigate the difficulties and open access to those with special needs. It keeps abreast of developments in psychosocial and disability issues at the workplace.

This is mainly carried out by dissemination of information through awareness raising initiatives which include organisation of lectures, participation in local conferences and sectoral fora, television and radio programmes, the issue of media releases and networking with private and public bodies and NGO's. However this approach is also complemented by promoting improved working conditions, in particular through implementation of its Collective Agreement. This in turn results in financial and social benefits to the workers, the entity and society as a whole. During the period under review, the OHSA had a staff complement of 26, of whom 6 (23.07%) were female.

As of 2011, amendments to registration procedures and feedback toolkits used by delegates for OHS awareness raising events enabled the compilation of gender disaggregated statistics and a better understanding of expectations.

As in previous years, the Authority's focal point for equal opportunities participated as necessary in activities organized by the National Commission for the Promotion of Gender Equality (NCPE) and the *Kummissjoni Nazzjonali Persuni b'Disabilita'* (KNPD).

Two female personnel are benefiting from Family Friendly Measures (one on a Career Break and the other on Parental Leave), while another female employee is benefiting from reduced hours.

#### 6 Assistance provided to the Authority

# 6.1 EU Projects: Structural Funds (2007-2013 Programming Period): ESF 3.56

As reported in last year's activity report, during the third quarter of 2011 the OHSA brought to a conclusion a project started during 2009 through which it carried out specialized research on OHS and also developed the requirements of an OHS certification / accreditation system for third party OHS practitioners. This project was partly financed by the European Union under Operational Programme II – Cohesion Policy 2007-2013 (European Social Fund (ESF)).

The final part of this project was devoted to wrapping up the statutory documentation, project control and to other publicity actions, including an end of project seminar as well as a publicity campaign on local newspapers to highlight the main finding of the research.

The findings of the research were deemed to be a matter of public interest and placed on the OHSA's website.

### 6.2 ESF 4.171 – new ESF proposal 2012

OHSA submitted an application for funding to PPCD under the European Social Fund to build and further consolidate the measures taken so far to improve OHS levels in Malta.

This proposal includes 3 sub components:

**Component A - Training of OHS Officers** employed with OHSA in the practical implementation of a number of EU Directives, including: (i) Directive 92/57/EEC (Temporary and mobile construction site) – transposed as LN 281 of 2004; (ii) Directive 2004/40/EC (protection of workers exposed to electromagnetic fields), which will be transposed into local legislation next year: (iii) Directive 2009/148/EC (protection of workers exposed to asbestos at work) as transposed by LN 323 of 2006; (iv) Directive 2006/25/EC (protection of workers from exposure to artificial optical radiation) transposed locally as LN 250 of 2010; and (v) Directive 2002/44/EC (protection of workers from exposure to vibration), transposed locally as LN 271 of 2005.

**Component B – simplification of OHS legislation**. Through this proposal all existing Maltese OHS legislation will be reviewed with the scope of identifying specific clauses, articles or regulations which may be imposing an unnecessary administrative burden on duty holders, or which are overly complex to understand and as a result may hinder *bona fida* duty holders from achieving compliance. This activity also envisages the preparation of legal amendments for consideration by the Authority.

**Component C – Strengthening social dialogue on OHS.** This project component will involve a number of visits at places of work which employ less than 50 workers, including self employed persons (with and without employees) to discuss key OHS issues surrounding today's work environment.

Following these meetings duty holders will be able to engage in meaningful social dialogue for example when providing feedback to their representative constituted bodies, which on their part can change or influence the development of

national policies. As a result of this empowerment these duty holders will be in a position to influence change through existing structures and within the parameters of their respective legal duties.

#### 6.3 ERDF – installation of photovoltaic panels

During 2012 OHSA commenced preparatory work on a proposal for the funding required for the installation of photovoltaic panels on its premises. To this effect, an energy audit report was prepared by an independent consultant and its findings will be used for the application which should be issued by PPCD in the coming months. This complements OHSA's 'green' measures in promoting a reduced carbon foot print, which include low emission transport, recycling bin areas, the gradual replacement of first generation energy saving lights through the introduction of LEDs and controlled use of energy consuming devices.

#### E External Relations

Many new initiatives and advances occur at an international level and OHSA is ensuring that through its active participation and membership of various entities, the issues and concerns of Malta are voiced. Moreover, good practice and expertise that might be relevant to the island are also taken on board.

Over the past year, OHSA has participated in the ongoing discussions prior to the preparation and launch of the European Union Community Strategy for Occupational Safety and Health, 2013-2020. This new strategy will replace that for the period 2007 – 2012, entitled "Improving Quality and Productivity at Work – Community Strategy 2007 – 2012 on health and safety at work". OHSA feels that this new strategy needs to emphasize the positive association between having adequate levels of OHS for all workers, and economic growth, competitiveness and long-term sustainable employment. Promoting healthy and safe work practices also helps workers remain healthy beyond their working lives. OHSA also feels that the strategy should encapsulate a Community-wide vision outlining broad aims, translated by the Member States into National Action Plans, with each state having the flexibility of determining its own priorities and the actions planned to be taken, including targets. The importance of harmonisation of data collection in this regard

assumes greater importance and urgency, especially in so far as the collection of work-related injuries and cases of ill-health is concerned, keeping in mind the differing views amongst Member States on what constitutes an accident at work.

#### **1** Senior Labour Inspectors Committee

The Committee of Senior Labour Inspectors (SLIC) set up by Commission Decision of the 12 July 1995 (95/319/EC), is a forum for discussion between the European Commission and the representatives of the Member States' national authorities who are, amongst other things, responsible for monitoring the enforcement of secondary Community law on OHS matters and who are consequently in direct contact with the businesses affected by it. The Committee provides the Commission with a channel for receiving information about any problems relating to the enforcement of secondary Community law. It is also a forum for the national authorities to compare experience of the structure, methods and instruments of labour inspection. The original Commission Decision has now been amended by a Commission Decision of the 22 October 2008, so that each Member State is represented by one Committee member (instead of the previous 2).

The OHSA recognizes the benefits that can accrue from making full use of membership of this group, and participates actively in all meetings, including plenaries, a number of Working Groups, participation in the various SLIC Inspection Campaigns and in the exchange of Labour Inspectors initiative.

Two thematic days took place in 2012 under the auspices of the Danish and the Cypriot Presidencies. The Thematic Day held in Copenhagen (Denmark), on 21st May 2012 consisted in a number of presentations on targeting and evaluation at a strategic, tactical and operational level. The presentations provided a broad perspective on working with both effects and interventions and on the 'pros and cons' when it came to measuring effects, presenting terminology for evaluation in the highly complex field of health and safety at work. The thematic day also provided a useful insight into how some countries are working with measurements of impact, efficiency and productivity in the field of OSH. During the Thematic Day held in Nicosia (Cyprus), on 29th December 2012, the current situation in workplace ergonomics in various Member States and the prevailing trends regarding ergonomics were examined. The Thematic Day was concluded with a panel discussion focussing on the applicability of the presented issues in other Member States, and on European initiatives on ergonomics implemented under SLIC. Malta's Member on SLIC was asked to Chair one of the panels and present his views on the desired structure and objectives of the proposed Commission directive on ergonomics.

Of particular relevance, is OHSA's participation in SLIC's Working Group on Enforcement (WGE), which not only serves as a forum for the rapid information exchange between inspectorates, but also gives proposals to the SLIC plenary on possible initiatives that can be taken by the Member States.

The objectives of WGE are to (i) discuss issues pertaining to Cross Border Enforcement, and to provide mutual assistance between ohs inspectorates on infringement of national legislation, (ii) ensure the uniform enforcement of community legislation across the Member States, (iii) manage new, broader and more complex working environment problems, (iv) exchange examples of good practice and enforcement methods, and (v) exchange and train ohs inspectors. Each Member State appoints one member of WGE.

#### 2 European Agency for Safety and Health at Work

The Agency is a tripartite European Union organisation and brings together representatives from three key decision-making groups in each of the EU's Member States – governments, employers and workers' organisations. The Administrative Board sets the Agency's goals and strategy, including the identification of priority OSH issues where further information or activity is required, it appoints the Director, adopts the Work Programme, the Annual Report and the Agency's budget, and authorises the Director to administrate the budget. Malta has 3 full members on the Agency's Administrative Board.

The Agency's principal safety and health information network is made up of a 'Focal Point' in each EU Member State, in the four EFTA countries and in the

Candidate countries. This network is an integral part of the Agency's organisation and Focal Points are nominated by each government as the Agency's official representative in that country and are normally the competent national authority for safety and health at work. In the case of Malta, the Authority is the Focal Point of the Agency and a national information network was also set up locally to ensure that the views of all stakeholders are represented during Focal Point meetings. Members of this network include government department and entities, trade unions, employers associations and various NGOs.

The Agency also has a number of expert groups to which national experts are nominated on specific subjects according to their competence. Such groups include internet, education and agriculture amongst others.

The Authority endeavours to participate as much as possible, and within the constraints of its available time and resources, in all initiatives launched by the European Agency.

#### 3 Labour Inspection Network & Exchange System

OHSA continued to participate actively in the information exchange network between Member States on information about OHS matters Knowledge Sharing Site (KSS).

The Knowledge Sharing Site (KSS) is currently being used by the EU 27 and 3 other EFTA countries and is part of the CIRCA (Communication & Information Resource Centre Administrator) extranet tool, developed under the European Commission IDA programme. It enables users to share documents, exchange information and also to participate in discussion forums on selected topics.

Malta has on several occasions made use of this network by asking questions on such diverse subjects as the practical implementation of specific provisions of EU directives or about Member State experiences in tackling particular situations which give rise to problems of control, prevention or protection.

#### 4 Advisory Committee for Safety and Health at Work

The Advisory Committee for Safety and Health at Work has been established by means of a Council Decision with the task of assisting the Commission in the preparation, implementation and evaluation of activities in the fields of safety and health at work. Specifically, the Committee shall conduct, on the basis of the information available to it, exchanges of views and experience regarding existing or planned regulations, help to devise a common approach to problems in the fields of safety and health at work, and to identify Community priorities as well as the measures necessary for implementing them. More importantly, the Advisory Committee has the important task of drawing the Commission's attention to areas in which there is an apparent need for new knowledge and for suitable training and research measures, and to express opinions on the annual programme and the rotating four-year programme of the European Agency for Safety and Health at Work.

In fulfilling its functions, the Advisory Committee cooperates with the other Committees which are competent for health and safety at work. This Committee is tripartite and the Authority has participated actively not only in the plenary sessions of the Committee, but also in the Governments' Interest Group meetings.

#### 5 Meeting of Experts on Musculoskeletal Disorders

OHSA continued with its participation in a technical group made up of national experts who were tasked with assisting the European Commission in developing a new legislative initiative on musculoskeletal disorders and ergonomic issues. The Commission had proposed a new legislative instrument that addresses all significant risk factors of work-related musculoskeletal disorders and laying down minimum health and safety requirements for protecting workers from exposure to these risk factors in all workplaces.

The Commission had included this initiative in its legislative work programme for 2009, which took the form of a simplification exercise that aims to make legislation easier to apply (reducing the number of reference texts), less burdensome (simplifying administrative and technical obligations) and more effective (making the legislation easier to implement and enforce than at present). The first draft was discussed within this technical group. In particular, the new legislative initiative is intended to reduce the number of regulatory texts that cover aspects of prevention of work-related musculoskeletal disorders by integrating the provisions of Directives 90/269/EEC (manual handling of loads) and 90/270/EEC (work with display screen equipment) into a single new directive. It would also provide employers with a clearer and more streamlined framework for risk assessment and prevention. In addition, enforcement activities would be conducted with reference to a simplified framework to maximise synergies, minimise overlaps and redundancies and increase the clarity and consistency of Community rules. This new legislative instrument would take the form of an individual directive within the meaning of Article 16(1) of Council Directive 89/391/EEC.

## 6 International Atomic Energy Agency / European Commission (Radiation Protection/Nuclear issues)

Since Malta joined the International Atomic Energy Agency's (IAEA) Illicit Trafficking Database (ITDB) Programme the RPB has acted as the Maltese focal point for receiving and transmitting data under the ITDB programme, a total of 119 reports were received in the period 1st November 2011 to 12<sup>th</sup> December 2012

The RPB acts as the focal point for nuclear safeguards activities including sending the necessary reports. It also processes environmental monitoring data received from MEPA and the Department for Environmental Health and transmits it to the European Commission.

Plans are underway for the RPB to host an IAEA international workshop here in Malta to discuss issues relating to *Trans-boundary movement of scrap metal and other commodities that inadvertently contain radioactive material*. It is envisaged that the workshop will take place in June and that 15 to 20 participants from countries in the Mediterranean area will attend as well as participants from Malta.

#### 7 Seveso II Committee of Competent Authorities (CCA)

The officer representing the OHSA in the CCA attended a seminar organised by the European Union Network for the Implementation and Enforcement of Environmental Law (IMPEL) in November 2011 in France. This organisation strives to raise awareness, sharing of experiences, providing guidance and tools, enforcement cooperation and giving feed back to lawmakers and regulators. Another important function is the analysis of accidents and their impacts with the aim of finding the root causes and extract lessons so that similar accidents can be avoided.

A total of 13 accidents were presented during this one and a half day seminar. There were around 220 participants from 30 countries. Emphasis was made on raising awareness especially amongst schoolchildren and establishing a risk prevention plan related to aging of equipment. It was pointed out that the latter is often the cause of accidents. Operators were encouraged to give particular attention to this issue by performing regular scheduled maintenance and upgrades when required. Near misses or smaller accidents are important and these should be analysed and investigated in depth.

The first meeting of the Competent Authorities Seveso Expert Group responsible for the implementation of the Seveso II Directive was held in Cyprus in September 2012. The workshop which preceded the meeting was of particular interest because it was on Land Use Planning. Various presentations outlining the methodologies, procedures and criteria of different countries were delivered. These were from Cyprus, Austria, Denmark, Portugal, France, Ireland, Greece, Belgium and the UK. The Major Accident Hazards Bureau (MAHB) also presented the work being undertaken to develop software to carry out risk analysis and prepare consultation zones for COMAH sites. This workshop provided an excellent opportunity to speak to the Head of MAHB for possible collaboration and training in the use of this new software.

The CCA meeting focused mainly on the new Seveso III Directive. The Commission explained the roles of the Seveso Expert Group and the CCA and how these will operate. The main changes in Seveso III are due to the (Classification, Labeling and Packaging) CLP Directive. Other changes affect access of information, clarify definitions and introduce new ones, and introduction of new named substances. The French delegation produced a non paper for further discussions on the implementation of this Directive. The Commission presented a report on the progress made with eMARS (Major Accident Reporting System) which is now able to provide reports on queries set by the user. The effectiveness of the Mutual Joint Visits was highlighted as a means of sharing experiences between inspectors from different Member States. The Finnish delegate gave a presentation on a fatal accident that occurred in an upper tier establishment involving inhalation of hydrogen sulphide.

#### 8 Framework Agreements

Article 155(1) of the Treaty on the Functioning of the European Union creates the right of the social partners at European level to enter into contractual relations (including agreements) on certain employment and social affairs issues. Such agreements may arise out of the consultative process provided for in Article 154. Under Article 155(2), agreements concluded at Union level may be implemented either by the social partners and the member states, or by a Council decision on a proposal from the Commission. European social dialogue has resulted in over 300 joint texts by the European social partners, the result of the European social dialogue autonomous process, and including different cross-industry framework agreements under Articles 154 and 155 of the Treaty on the functioning of the European Union (TFEU).

Two different procedures exist for their implementation. In the first instance, European social partners ask the Council to adopt a decision (in practice, this is a directive, proposed by the Commission), so that the Agreement becomes part of EU law. Three agreements have been implemented by Council Directive, the parental leave (1996), (with revised text in 2008), the part-time work (1997) and fixed-term contracts (1999) agreements. These agreements are not directly related to the work carried out by OHSA.

Another option exists whereby the social partners themselves take responsibility for implementing measures at national, sectoral and enterprise level. Several autonomous agreements have been negotiated which are of direct relevance and interest to OHSA – the agreements on telework (2002), work-related stress (2004), harassment and violence at work (2007), and third party violence and harassment (2010) agreements.

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In its report on the implementation of the European social partners' Framework Agreement on Work-related Stress, published in February of 2011, the European Commission noted that "Worryingly, the social partners in a number of countries (including Malta) have not reported on the implementation of the Agreement, giving rise to heightened concern, given that the social partners have not reported on the first European social partners' autonomous agreement on telework either."

Faced with this situation, and despite not being a signatory to the Framework Agreement, OHSA took the initiative of bringing representatives of the social partners together, and following the organisation of a dedicated seminar, and having established an *ad hoc* committee, will continue to spur the social partners into action. Whereas OHSA will coordinate the necessary action, and will provide all the administrative and technical assistance required, it is hoped that the social partners themselves will take further meaningful initiatives in this field.

On the 26<sup>th</sup> April 2012, the Framework Agreement on the protection of occupational health and safety in the Hairdressing Sector was signed. It aims at providing an integrated approach for the prevention of risks and protection of occupational health and safety, particularly in the following areas: (i) use of materials, products and tools; (ii) the establishment of provisions in order to prevent, eliminate or reduce work related health risks; and (iii) the retention of skilled workers in the sector.

The signatory social partners, Coiffure EU and UNI Europa Hair and Beauty have called upon the EU to present this framework agreement to the Council for a Decision, so that the Agreement becomes binding in the Member States, and to extend its provisions to all workers in the sector, including the self-employed.

OHSA is of the belief that that there remains a very important scope for a social partners agreement in this sector. Indeed such an agreement can provide added value in situations which are not specifically referred to in existing legislation. Such agreements can also generate greater commitment from any specific sector. However, OHSA is also of the view that legislative proposals from the Commission should be supported by an impact assessment that adequately justifies the need for legislation. It is to be noted for example that existing EU Directives already provide

coverage to most of the issues falling within the scope of this agreement including hazardous chemical agents, environmental protection, MSDs. workplace environment, product safetyand issues relating to placing on the market and also maternity protection. Furthermore, with regards to musculoskeletal protection, the EU Commission is currently working on a consolidated Ergonomics Directive. Additionally, the self employed category are already included within the applicability of the OHS Authority Act 2000, and no changes to the principal Act are required to make this Framework Agreement applicable to self employed hairdressers. For these reasons, OHSA is of the view that this Agreement should not be included in a directive since a Directive addressing this sector will have huge economic impacts on the local sector. Malta strongly reaffirms its position that any Framework Agreement should remain binding on the signatory parties, and should not result in the issue of new Directives unless the real impacts of any potential directives have been evaluated, and without the full concurrence of Governments.

# 9 Presidency Conference: "Review of the EU OSH Strategy2007-2012 and priorities for the future"

During June 2012, OHSA participated in the Presidency Conference on Health and Safety at Work held in Copenhagen, Denmark about the "Review of the EU OSH Strategy 2007-2012 and priorities for the future". This conference was organized by the Danish Working Environment Authority, in collaboration with the European Commission.

The current EU strategy on OHS expired at the end of 2012 and the preliminary results of the final evaluation exercise of this Strategy were discussed between the EU's social partners at this conference. This conference also identified a number of priorities for future policy action in this area.

#### 10 Participation in local boards and committees

The Authority is also represented in a number of local boards and entities, most of which have a legal standing. These include:

- Civil Protection Scientific Committee Chaired by the Civil Protection Department, with representatives from various other entities. The Committee gives advice to the CPD on different matters and emergencies that may arise from time to time. In line with protocol, the OHSA representative forwarded his offer of resignation following the last general elections – to date no request for nomination on this committee has been sent to OHSA.
- Integrated Pollution Prevention and Control Committee The IPPC (Integrated Pollution Prevention and Control) Committee is established by virtue of L.N. 234 / 2002 of the Environment Act. It is chaired by MEPA. The committee oversees the definitive establishment of IPPC installations, the inspection of installations and ensures compliance with the necessary legal requirements. The ultimate aim of the IPPC is to minimise pollution from various point sources. All installations falling under the relevant legal notice are required to obtain a prior authorisation (permit) from MEPA.

As Integrated Pollution Prevention is a multi-disciplinary task a Committee to deal with the regulatory aspect of the Regulations has been set up.

 Biosafety Co-ordinating Committee - The Biosafety Co-ordinating Committee is a committee the aim of which is to achieve an integrated approach on Biosafety, the contained use of genetically modified micro organisms, the deliberate release into the environment of genetically modified organisms and the placing on the market of genetically modified organisms, in order to achieve a high level of protection of human health and the environment taken as a whole. The main function of the BCC is to give statutory advice to the board of MEPA on the risks to human health and the environment from the release and marketing of GMOs.

In view of its limited resources, OHSA does not carry out any inspections related to biosafety, and the contained use of GMOs. It is hoped that a memorandum of understanding between OHSA and MEPA is agreed upon in order to define the respective roles and responsibilities for when joint inspections can be carried out.

- Pesticides Control Board The Pesticides Control Board is established by virtue of the Pesticide Control Act, Chapter 430. The Pesticides Control Board has the responsibility for advising the Director of Plant Health on any matter relating to the registration, restriction, importation, manufacture, sale or use of pesticides including those employed in integrated control management; it also reports to the Director of Plant Health on any matter relating to the regulating, enforcing and monitoring of all legislation relating to pesticides or on any matter regarding pesticides; provides advise on measures to be taken on any matter arising from the application of any regulations made under the Pesticide Control Act.
- Radiation Protection Board The Radiation Protection Board has the responsibility for all aspects of the regulatory control of ionizing radiation and nuclear issues. The Radiation Protection Board is chaired by the OHSA and has members from OHSA, the Department for Environmental Health (formally Public Health), the Environment Protection Directorate (within MEPA) and Civil Protection Department.
- COMAH Competent Authority (CA) This is made up of the OHSA, MEPA (Environment Protection Directorate) and the CPD and oversees the implementation of the Control of Major Accidents Regulations, L.N. 37/2003 and its amendment L.N. 6/2005. The OHSA is the lead Authority and coordinates the functions of the COMAH CA.
- Building Industry Consultative Council (BICC) The BICC was set up by the Government to ameliorate the performance of the local construction industry and to serve as a forum for discussion on all matters that affect the construction industry. OHSA is represented by a full Member and by an alternate Member and takes an active participatory role, especially on matters that concern the relationship between the construction industry and occupational health and safety.
- Technical Committee Standard for Children's Play Areas

Acting on a proposal made by the Commissioner for Children, the Standards and Metrology Institute of the Malta Competition and Consumer Affairs Authority has set up a Technical Committee tasked with developing a national standard concerning 'Safety of Children's Play Areas'. OHSA has been invited to form part of this Committee and is providing input with regards to various technical issues. The scope of the Standard, which is intended to cover play areas intended to be used by children up to 14 years of age, will address amongst other issues, the planning, designing, layout and development of play areas, their management and inspection and maintenance procedures, together with procedures for first aid and emergencies and for reporting injuries.

#### • Network of enforcement agencies operating in the environmental field

The National Environment Policy formulated by government and published in February 2012, envisages that a network between the various enforcement agencies operating in the environmental field is established.

The broad terms of reference for this network are the encouragement of improved communication between these diverse agencies, the taking of joint activities (including training, monitoring and direct actions, and the identification of priority enforcement areas and the lead agency/agencies for such areas for effective enforcement thereof. This Network was established late in 2012 and OHSA was invited to form part of the Network.

## F Freedom of Information and Corporate Governance

#### **1** Freedom of Information Act (Cap. 496)

In furtherance of the scope of the said act and thus to increase transparency and accountability, towards the end of 2011, OHSA reviewed the necessary structures such as the appointment of an FOI Officer and alternates and tested the electronic and manual enquiry mechanisms in place for this purpose. In terms of said Act, the general public shall be granted right of access to documents held by public authorities, (including all ministries and departments). The Act came into force in September 2012.

### 2 Corporate Governance

Since it was established, the OHS Authority has considered itself to be an intrinsic part of the Central Administration, and therefore has taken on board and followed all policies and rules of good governance that are established by the Government.

As a matter of fact, and especially in so far as employment issues are concerned, the OHSA remains guided by those policies established by the Office of the Prime Minister (and the Management and Personnel Office) from time to time, including on matters concerning salaries (these are determined by Government's Collective Bargaining Unit with reference to equivalent public service salary scales) other conditions of employment and recruitment, finances, information systems and public procurement.

### 3 Corporate Social Responsibility

The Authority facilitated a number of reservations in terms of OHS awareness training to delegates nominated by NGOs. Members of staff also responded to calls from the National Blood Bank to donate blood. In both situations the persons involved in the respective initiative were compensated with time off in lieu. During the period under review, a number of OHSA employees carried out voluntary work at the National Archives.

## Annex 1: Key Activities carried out by the Authority

November 2011	- December 2012
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		Gender disaggregated statistics with respect to beneficiaries		
	Total	Females	Males	
Workplace visits	2100	n/a	n/a	
Equipment certificates vetted *	7286	n/a	n/a	
Radioactive Material cleared for import	208	n/a	n/a	
Staff development man hours	348	81	267	
Staff development by employee	16	4	12	
Hours of training delivered	451	157	294	
Number of participants at OHSA training	423	126	297	
Number of courses organised	37	n/a	n/a	
Press releases / feature articles	36	n/a	n/a	

\* Including 5231 lift certificates, 316 crane certificates, 513 forklift truck certificates, 148 boiler certificates, and 1078 certificates for other equipment.

## Annex 2: List of OHS legislation in force

	Legislation	Reference
1	Act XXVII of 2000, Occupational Health and Safety Authority Act	Сар. 424
2	Work Place (Minimum Health and Safety Requirements) (Amendment) Regulations, 2012	L.N. 437/2012
3	Protection of Maternity at Work (Amendment) Regulations, 2012	L.N. 436/2012
4	Protection of the Health and Safety of Workers from the Risks related to Chemical Agents at Work (Amendment) Regulations, 2012	L.N. 53/2012
5	Occupational Health and Safety (Payment of Penalties) Regulations, 2012	L.N. 36/2012
6	Work Place (First Aid {Amendment}) Regulations, 2011	L.N. 348/2011
7	Work Place (Minimum Health and Safety Requirements for the Protection of Workers from Risks resulting from Exposure to Artificial Optical Radiation) Regulations	L.N. 250 of 2010
8	Protection of the Health and Safety of Workers from the Risks related to Chemical Agents at Work (Amendment) Regulations	L.N. 353 of 2007
9	Inspection of Lifts Regulations	L.N. 231 of 2007
10	Protection of Workers from the Risks related to Exposure to Asbestos at Work Regulations	L.N. 323 of 2006
11	Work Place (Minimum Health and Safety Requirements for the Protection of Workers from Risks resulting from Exposure to Noise) Regulations	L.N. 158 of 2006
12	Control and Security of High-Activity Radioactive and Orphan Sources	L.N. 13 of 2006
13	Work Place (Minimum Health and Safety Requirements for the Protection of Workers from Risks resulting from Exposure to Vibration) Regulations	L.N. 371 of 2005

14	Control of Major Accident Hazards (Amendment) Regulations	L.N. 6 of 2005
15	Protection of Young Persons at Work Places (Amendment) Regulations	L.N. 283 of 2004
16	Work Equipment (Minimum Safety and Health Requirements) Regulations	L.N. 282 of 2004
17	Work Place (Minimum Health and Safety Requirements for Work at Construction Sites) Regulations	L.N. 281 of 2004
18	Nuclear Safety and Radiation Protection (Amendments) Regulations	L.N. 173 of 2004
19	Work Place (Minimum Requirements for Work) (Confined Spaces and Spaces having Explosive Atmospheres) Regulations	L.N. 41 of 2004
20	Protection of Workers in the Mineral Extracting Industries through Drilling and of Workers in Surface and Underground Mineral-extracting Industries Regulations	L.N. 379 of 2003
21	Protection of Workers from Risks related to Exposure to Biological Agents at Work Regulations	LN 228 of 2003
22	Protection of the Health and Safety of Workers from the Risks related to Chemical Agents at Work, Regulations	L.N. 227 of 2003
23	Protection of Workers from the Risks related to Exposure to Asbestos at Work Regulations	LN 123 of 2003
24	Regulations on the Protection of Workers from the Risks related to Exposure to Carcinogens or Mutagens at Work	LN 122 of 2003
25	Minimum Requirements for the Use of Personal Protective Equipment at Work Regulations	LN 121 of 2003
26	Regulations establishing a First List of Indicative Occupational Exposure Limit Values on the Protection of the Health and Safety of Workers From the Risks related to Chemical Agents at Work	LN 120 of 2003
27	Nuclear Safety and Radiation Protection Regulations (issued under Cap. 365).	LN 44 of 2003
28	Control of Major Accident Hazard Regulations	LN 37 of 2003
29	General Provisions for Health and Safety at Work Places Regulations	LN 36 of 2003
30	Protection against Risks of Back Injury at Work Places Regulations	LN 35 of 2003

31	Factories (Night Work by Women) (Repeal) Regulations	LN 34 of 2003		
32	32 Workplace (Provision of Health and, or Safety Signs) Regulations			
33	Work Place (Minimum Health and Safety Requirements) Regulations	LN 44 of 2002		
34	Minimum Health and Safety Requirements for Work with Display Screen Equipment Regulations	LN 43 of 2002		
35	Work Place (First Aid) Regulations	LN 11 of 2002		
36	Occupational Health and Safety Appeals Board (Procedural) Regulations	LN 10 of 2002		
37	Protection of Young Persons at Work Places Regulations	LN 91 of 2000		
38	Protection of Maternity at Work Places Regulations	LN 92 of 2000		
39	Factories (Health, Safety and Welfare) Regulations	LN 52 of 1986		
40	Power Presses Regulations	LN 25 of 1984		
41	Steam and Hot Water Boilers Regulations	LN 34 of 1976		
42	Building (Safety) Regulations	LN 96 of 1968		
43	Factories (Hoists and Lifts) Regulations	LN 47 of 1964		
44	Factories (Superintendence and Control of Plant) Regulations	GN 340 of 1954		
45	Dock Safety Regulations	GN 497 of 1953		
46	Factories (Woodworking Machinery) Regulations	GN 787 of 1949		
-				

## Annex 3: Budgeted Income and Expenditure Account

1<sup>st</sup> January 2013 – 31<sup>st</sup> December 2013

Occupational Health & Safety Authority		
Budget for the year ending		
31st December 2013		
	€	€
Income		941, 525
Personal Emoluments		
Staff Salaries	553,821	
Honoraria to OHSA members	33,543	
NI Contributions	45, 217	
Overtime / Allowances / Statutory Bonuses	74,822	
		707,404
Operational Expenses		
Utilities	34,200	
Material & Supplies	7,620	
Repair & Upkeep	30,100	
Rent	28	
Subscriptions	1,000	
Office Services	7,400	
Transport	46,858	
Travel	15,000	
Information Services	2,500	
Contractual Services	28,000	
Professional Services	8,700	
Consultancy fees re LNG Plant	15,000	
Training and CPD	1,000	
Hospitality	1,500	
Incidental Expenses	500	
Depreciation	19,684	
Transfers from government capital grants	(19,684)	
Total Operational Expenses		199,406
Contributions and Initiatives		
Appeals Board	1,165	1,165
Total Budget Cost		849,957
Budgeted surplus / (deficit)		<u>33,55</u> 0

Out of the anticipated surplus of €33,550 for 2013, OHSA will be applying for a virement of funds amounting to €23,734 which will be utilised for capital expenditure in particular server replacement, computer software upgrade, and a new CPU and hardware and software upgrades for its PABX system. The remaining surplus of €9,816 will be used to offset the deficit incurred during 2012. This deficit came about as a result of the funds withheld by MFEI (amounting to €142,500) from OHSA's approved allocation of €820,000). The funds withheld were earmarked by OHSA for capacity building and operational purposes.

The Financial Statements of the Authority for the period ending 31<sup>st</sup> December 2012 are being included in a separate report.

## Annex 4: Documentation relating to the request for Ministerial approval of supplementary estimates.

AWTORITÀ GHAS-SAHHA U S-SIGURTÀ FUQ IL-POST TAX-XOGHOL 17. Triq Edgar Feiro, Pietà PTA 1533 - Malta Tel: (+358) 21 247 677 \* Fax: (+358) 21 232 909 Emeil, ohse@gov.mt \* http://www.ohse.org.mt VAT Nd: MT 1664-1504



#### OCCUPATIONAL HEALTH & SAFETY AUTHORITY

17. Edgar Farro Streat, Pieta PTA 1533 - Malta Tel: (+356) 21 247 677 \* Fax: (+356) 21 232 909 Email: ohsa@gov.mt \* http://www.ohsa.org.mt VAT Nd: MT 1664-1504

#### 20<sup>th</sup> December 2012.

The Honourable Minister for Health,

the Elderly and Community Care,

Palazzo Castellania, Merchants Street,

Valletta.

Honourable Minister,

#### Approval of Supplementary Estimates for OHSA for 2012.

According to the OHS Authority Act, the Authority's budget needs to be approved by Parliament, which last approved OHSA's Budgeted Income and Expenditure Account for the period 1<sup>st</sup> January to 31<sup>st</sup> December 2012. Towards the end of 2012 (specifically on the 5<sup>th</sup> of December 2012) OHSA's Collective Agreement for the period 2012 – 2016 was signed, having been agreed upon by OHSA, PACBU, MHEC and UHM. The said agreement provides, *inter alia*, for an increase in wages with effect from January 2012, and provides for a one-off payment of €250 to each employee who was in employment with the Authority in 2011.

The full extent of this expenditure was not covered by the estimates of the Authority approved by the House of Representatives for the period January to December 2012, since the aggregate payment due for 2011 and 2012 in terms of the agreement is in excess of the contingency provided for in the said estimates. Furthermore, the sum of €92,500 was withheld by the Ministry of Finance from the last tranche for 2012. This notwithstanding, the Authority's cash flow still permits the payment of this extraordinary expense arising out of the Collective Agreement.

For this reason, the Authority needs to seek the Minister's approval in terms of section 32(2) (d) of the Occupational Health and Safety Authority Act which provides that:

"if in respect to any financial year it is found that...the need has arisen for expenditure for a purpose not provided for in the estimates, the Authority may adopt supplementary estimates for approval by the House and, pending such approval, the Authority may in special circumstances and with the approval of the Minister, incur the relative expenditure or part thereof as the said Minister may so approve..."

In view of the above The Authority has drawn up supplementary estimates (attached) and which need your approval for the expenditure in question.

The Authority has also sought legal advice on the matter from the Authority's lawyers which is also being attached.

Roberta Messina, Chairperson

Mark Gauci Chief Executive Officer

Occupational Health & Safety Authority Budget for the year ending 31st December 2013



Budgeted Income & Expe	enditure A	ccount		Actual 2012		Additional Requirement	
	Note	€	¢	¢	€	€	
Income			780,000				
Personal Emoluments							
Staff Salaries		461.577		464,410			
Honoraria to OHSA members		33,543		32,876			
NI Contributions		36,411		37,201			
Overtime / Allowances / Statutory Bonuses		63,358		76,183			
			594,889		610,670	15,781	
Operational Expenses		26.000					
Utilities	2	4,700					
Material & Supplies	3	25,200					
Repair & Upkeep	4	28					
Rent		500					
Subscriptions		5.500					
Office Services	5	40,500					
Transport	ő	17,000					
Travel	7	8,000					
Information Services	8	27,500					
Contractual Services	9	32,700					
Professional Services	10	1,000					
Consultancy Fees		1.000					
Training and CPD		500					
Hospitality							
Incidental Expenses							
Depreciation							
Transfers from government capital grants		1,165					
Total Operational Expenses		-	191,293				
Contributions and Initiatives							
Appeals Board							
Total Budget Cost			786,182				
Budgeted surplus / (deficit)			(6,182)				

ÆQUITAS Æ

20th December 2012

Dr Mark Gauci Chief Executive Officer Occupational Health & Safety Authority 17, Trig Edgar Ferro, Pieta, PTA 1533

Approval of additional expenditure for 2012 with respect to Collective Agreement signed in 2012

Reference is made to the above-captioned matter.

We understand that in December 2012, the Authority entered into a Collective Agreement for the period January 2012 to December 2016. The said agreement provides, inter alia, for an increase in wages with effect from January 2012. The agreement, furthermore, provides for a one-off payment of €250 to each employee who was in employment with the Authority in 2011.

The full extent of this expenditure was not covered by the estimates of the Authority for the period January to December 2012 since the collective agreement was concluded in December 2012. The aggregate payment due for 2011 and 2012 in terms of the agreement is in excess of the contingency provided for in the said estimates.

The Authority, therefore, needs to seek the Minister's approval in terms of section 32(2) (d) of the Occupational Health and Safety Authority Act which provides that:

"if in respect to any financial year it is found that...the need has arisen for expenditure for a purpose not provided for in the estimates, the Authority may adopt supplementary estimates for approval by the House and, pending such approval, the Authority may in special circumstances and with the approval of the Minister, incur the relative expenditure or part thereof as the said Minister may so approve..."

In view of the above it is advisable that supplementary estimates are drawn up and the Minister's approval for the expenditure in question is sought.

Vicolette Spiteri Bailey LL.D.