

## AWTORITÀ GHAS-SAHHA U S-SIGURTÀ FUQ IL-POST TAX-XOGHOL Occupational health & safety authority

## Report of Activities for the period

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

**Budgeted Income and Expenditure Account** 

#### 1<sup>st</sup> January 2014 – 31<sup>st</sup> December 2014

**Occupational Health and Safety Authority** 

17, Edgar Ferro Street,

Pieta`, PTA1533 MALTA

http://www.ohsa.org.mt

2014

## Contents

	Index	1			
	PrefaceOHSA Objectives, Vision of the OHSA, Mission StatementMission AnalysisChairperson's MessageMembers of the OHS Authority				
	Introduction	10			
	Review of activities	11			
Α	Awareness building, information, education and training				
1	Initiatives with school children - NAPO				
2	Media initiatives	13			
3	European Agency for Safety and Health and the Maltese Focal Point				
3.1	Framework agreement on work-related stress	13			
3.2	Safe crane erection, examination and use				
3.3	Construction safety				
4	General promotional activities				
5	Training Initiatives	16			
6	Training for operators of fork lift trucks and cranes				
7	Degree Plus – University of Malta				
8	Website – http://www.ohsa.org.mt				
9	Pan-European opinion poll on occupational safety and health				
В	Ensuring compliance with existing legislation				
1	The introduction of pecuniary penalties within a broader enforcement framework	20			
2	Handling of requests for assistance or information	21			

3	Inspection campaigns : Hairdressing sector	22		
4	Notification of injuries and accident investigation			
5	Construction notification forms	23		
6	The construction sector	23		
7	Radiation Protection	23		
8	Machinery, equipment, plant and installations	25		
9	Occupational health			
9.1	Work related stress			
9.2	Health surveillance			
9.3	Notification of industrial diseases			
10	Work related accidents – Statistical trends	30		
11	Prosecutions conducted by OHSA	33		
12	DSS investigations	34		
13	MicroInvest: Tax Credits for Micro Enterprises and the Self	35		
	Employed			
14	Asbestos in workplaces	35		
С	Legislative reform	37		
D	Consolidating the Authority's resources	39		
1	Staff development	39		
2	Recruitment	40		
3	Internal industrial relations	41		
4	Use of premises	41		
5	Equal opportunities and gender mainstreaming	42		
6	Assistance provided to the Authority	43		
6.1	ERDF – installation of photovoltaic panels	43		
6.2	ESF 3.230 – 'Partnering employers to improve occupational health and safety'	44		

E	External relations	46		
1	Senior Labour Inspectors Committee			
1.1	Campaign for the prevention of slips, trips and falls			
1.2	SLIC Labour exchange			
2	European Agency for Safety and Health at Work			
3	Advisory Committee for Safety and Health at Work			
4	International Atomic Energy Agency / European Commission (Radiation protection / nuclear issues)			
5	Seveso II Committee of Competent Authorities (CCA) and Seveso Expert Group			
6	Framework Agreements			
7	Presidency Conference: 'Small Business and Occupational Safety and Health – the challenge and the opportunity'	53		
8	EU Commission questionnaire – Practical implementation of the Directives on OHS in the Member States	54		
9	Participation in local boards and committees	54		
F	Freedom of Information and Corporate Governance	58		
1	Freedom of Information Act (Cap. 496)	58		
2	Corporate Governance	58		
3	Corporate Social Responsibility	58		
G	OHSA's financial situation	59		
	Annex 1: Key Activities carried out by the Authority	60		
	Annex 2: List of OHS legislation in force	61		
	Annex 3: Budgeted Income and Expenditure Account	64		

#### Preface

The Occupational Health and Safety Authority Act, Cap. 424, was published on the 17<sup>th</sup> November 2000 and brought into force in its entirety 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 1<sup>st</sup> January 2013 to 31<sup>st</sup> December 2013, 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 2014 to 31<sup>st</sup> December 2014 (section 31 of the Act).

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 persons intimated that they have been found contravening the law, 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, the OHS Authority managed to end its financial year with a surplus of funds – it is anticipated that this surplus will cover the expected deficit in its finances for the forthcoming year.

### **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 in fulfilling its role, OHSA collaborates with, and involves other stakeholders (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, while workers understand the need to cooperate with their employer in the preventive and protective measures that are required to be taken.

#### Chairperson's Message

In the few months since I have been appointed as Chairperson of the Occupational Health and Safety Authority, and especially following my frequent interactions with representatives of the social partners and other stakeholders in this field, I could not but notice the wide consensus about the paramount importance of occupational health and safety, not only to employers and to workers, but also to society in general.

I have also come to realize and appreciate the dedication and hard work, often unheralded and unnoticed, put in by all the employees of the Authority. Despite OHSA's limited resources, the Authority's employees have been involved, amongst many other actions and initiatives, in the enforcement of OHS regulations, the preparation and dissemination of a large amount of information material, the provision of guidance, the organisation of hours of training programmes for workers as well as the fulfillment of a very wide range of international obligations.

OHSA's primary mission is intrinsically linked with the care and protection of what is Mata's best asset – its human resources. We cannot afford to squander nor neglect the hard won accomplishments of our workforce. On the contrary, we need to be mindful of the challenges the workplace presents to employees and employers alike arising out of competition or competitiveness, as well as those challenges presented by the work environment, the introduction of new technology and new work arrangements and organisation.

It needs to be recognised that occupational health and safety is a complex subject which requires the input of many stakeholders and duty holders – this is also reflected in OHSA's mission statement, which is to work with others to ensure healthier and safer workplaces in Malta.

Despite the relentless efforts of OHSA, many out there still need to be further convinced of the paramount importance that health and safety at work ought to be given in this country. Much more will be achieved once the health and safety mission is embraced by all - decision-makers, employers and workers alike. It is not an 'us and them' game - it is our game as we all stand to benefit, and the quicker we realize this, the better.

It is in a constructive spirit that I make a few observations.

Firstly, OHSA suffers from a number of operational limitations: for instance, there is a significant mismatch between its statutorily assigned functions and the resources available to it. This needs to be addressed as a top priority, in particular, but not limited to, its technical capabilities. On this point, it is with pleasure that I note that the Government has already taken steps to increase on an annual basis, OHSA's staff complement.

Secondly, the principal Act needs to be amended to reflect today's realities, including the changing world of work, the new forms of employment, as well as emerging risks brought about by technical innovation.

Thirdly, duty holders need to be encouraged to self-regulate – whereas OHS Officers have a very important role in facilitating the safeguard of workers, they on their own will never be sufficient. If real progress is to be registered in health and safety performance, employers and employees should work together to continuously improve standards, knowing that it is in their best interest to do so. Thus it becomes imperative that all stakeholders are encouraged and feel motivated to be clear about their contribution. Motivation assumes fundamental importance, based on an understanding that anything that needs to be done is undertaken in the interests of having healthier workers and better business performance. It is with this idea in mind that OHSA will, as of 2014, launch a fund to assist the social partners in organising awareness raising activities for their members.

On a final note, it is important that Maltese society in general understands that occupational health and safety is a vital factor in our life and should be a top priority on every person's agenda, part of the collective responsibility towards the promotion and safeguard of the highest degree possible of workers' health and safety.

The Hon. Dr. Deo Debattista MD, M.M.C.F.D., MP

Chairperson.

#### Members of the OHS Authority.

#### Chairperson/s

Ms. Roberta Messina (1<sup>st</sup> January 2013 to 5<sup>th</sup> August 2013).

The Honourable Dr. Deo Debattista (6<sup>th</sup> August 2013 to date).

#### **Deputy Chairperson**

The Director of Industrial and Employment Relations, ex ufficio.

#### Members

Dr. Tanya van Avendonk (1<sup>st</sup> January 2013 to 5<sup>th</sup> August 2013).

Ms. Cecilia Rizzo (1<sup>st</sup> January 2013 to 5<sup>th</sup> August 2013).

Mr. Michael Bonnici (1<sup>st</sup> January 2013 to 5<sup>th</sup> August 2013).

Mr. Edwin Balzan.

Mr. Victor Carachi.

Mr. Joseph Delia.

Ms. Carmen Borg.

Mr Alfred Lia (6<sup>th</sup> August 2013 to date).

Dr Yosef Micallef (6<sup>th</sup> August 2013 to date).

Mr Stephen Mc Carthy (6<sup>th</sup> August 2013 to date).

#### Secretary

Mr. Remigio Bartolo (1<sup>st</sup> January 2013 to 5<sup>th</sup> August 2013).

Ms. Marita Pisani (6<sup>th</sup> August 2013 to date).

#### **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 extensive and well-developed regulatory framework in Malta requires enforcement through workplace visits, which often trigger the need for further enforcement actions. However the functions of the Authority are not limited to policing workplaces – as a matter of fact, the OHS Authority Act 2000 assigns a total of twelve functions to the Authority, which on their part are translated into a whole range of activities. Thus the Authority also has to ensure that its Officers develop a wider range of skills, seeking in the first place to work cooperatively with both employers and employees, while being careful not to compromise their role of independent assessors of the control of risk at the workplace. At the same time, both the Authority and its Officers need to understand the legitimate needs of organisations making their way in a difficult market economy.

This approach to inspection necessitates a balance to be struck between the fundamental need to ensure that the law is complied with, and the importance of promoting and encouraging self-regulation.

Over the past year, the Occupational Health and Safety Authority intensified its work in relation to awareness raising and the dissemination of information. This has been achieved without any reduction in other deliverables, in particular in its enforcement actions. Despite the sustained downward trends in the occupational injury rates and the number of fatal accidents at work, OHSA feels that it remains an important part of its mission to keep emphasizing the positive correlations between sound occupational health and safety levels, enhanced productivity and the sustainability of operations. For this reason, the Authority devotes a lot of time and resources to this task – out of the 58 special activities scheduled to be carried out during 2013 in its Rolling Plan of Work, 21 activities were related to awareness raising, the dissemination of information and other initiatives aimed at bringing about changes of culture and mentality.

#### **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.

The Authority's priorities for the period under review have been determined as follows:

- A. Awareness building, information, education and training;
- B. Ensuring compliance with existing legislation;
- C. Legislative reform;
- D. Consolidating the Authority's resources, by embarking on a four-year capacitybuilding exercise as well as through its relations with other stakeholders and international agencies.

#### A Awareness building, information, education and training

Since it was established, OHSA has dedicated a lot of resources to disseminate information, raise awareness and in 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 including through the issue of press releases and the preparation of feature articles which are published in 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 - NAPO

Today's children are the workers of the future and for this reason the Authority recognizes the need to have basic concepts of occupational health and safety explained from an early age. What originally started as a cartoon mascot intended by its creators (a European consortium) to be used in short promotional video clips, was developed by OHSA into a life-size mascot visiting primary schools to meet nine to ten year old schoolchildren. During such visits, this OHS mascot, NAPO, together with an OHS Officer, emphasize the association between work and potentially harmful outcomes, therefore necessitating the need for prevention and the protection from risks.

The idea of using NAPO in schools was also welcomed and taken on board by the European Agency for Safety and Health, which is now producing its own professionally-made costumes. OHSA is in the process of obtaining one such costume to replace its own, which now shows sign of active wear.

OHSA has already received requests from other schools which will be entertained early next year. NAPO and the accompanying OHS Officer have also featured this year in a children's television programme, and OHSA is trying to have NAPO appear in more children's programmes.

#### 2 Media Initiatives

OHS officers participate in several radio and television programmes, mostly on an *ad hoc* basis. The Authority has issued a number of press releases and sent a number of letters to various newspapers dealing with specific areas of concern. Whereas OHSA's resources do not allow any sustained campaigns, OHSA has to rely on intermittent invitations issued by media operators.

During 2013, 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 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.

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

In its capacity as local Focal Point for the European Agency for Safety and Health (EU-OSHA), OHSA actively participates in all those European initiatives and campaigns which are of relevance to Malta. Furthermore, OHSA tries to make full use of the resources normally made available by EU-OSHA for the organisation of country-specific activities.

#### 3.1 Framework agreement on work-related stress

During 2012, OHSA developed a framework for the control of work related stress, which outlines the various steps that are required to be taken for the early recognition and prevention of work related stress. This action framework is also intended to bring into effect a European Social Partner Agreement, which is binding on the representatives of workers and their employers. The document prepared by OHSA, 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. It also 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.

In order to emphasise the importance of this Framework Agreement, the Occupational Health and Safety Authority in collaboration with the European Agency for Safety and Health at Work organized a seminar during 2013, when information was given about stress and its relation to work, the measures that can be taken to identify symptoms, and the range of preventive and protective measures that can be taken to control the extent of the problem within any particular organisation. Information was also given about the Employee Support Programme, which is run and coordinated by the Public Administration and HR Office (PAHRO) within the Office of the Prime Minister.

#### 3.2 Safe crane erection, examination and use

Cranes are commonly employed in the transport industry for the loading and unloading of freight, in the construction industry for the movement of materials and in the manufacturing industry. Cranes exist in an enormous variety of forms – each tailored to a specific use. Sometimes sizes range from the smallest jib cranes, used inside workshops, to the tallest tower cranes, used for constructing high buildings. In view of their common usage, sometimes with disregard to basic safety requirements, the use of such cranes in this manner can have catastrophic and often spectacular consequences. OHSA obtained EU-OSHA funds for the organisation of two seminars – one concerning safe crane erection and examination, and another on their safe operation.

The first seminar targeted owners, erectors and examiners of cranes, and included a key-note speaker who is a member of DGUV Expert Committee Construction Industry of Germany. The second seminar was intended for crane operators, and was addressed by representatives of the Chamber of Engineers. OHS Officers were also tasked to make other technical presentations during both seminars.

#### 3.3 Construction safety

Whereas there has been a lot of improvement in the prevailing levels of occupational health and safety in the construction industry, a lot more still needs to

be done. It is for this reason that this industry continues to retain its status as a primary target of OHSA's activities. In view of the high risks involved, the wide geographical distribution of activities that are going on at any one time, and the large number of operators and self-employed persons involved, further progress can only be achieved if there is the active involvement of all stakeholders in the field.

To promote synergies in this area, OHSA collaborated with the Federation of Building Contractors, the Malta Developers Association and the Building Industry Consultative Committee to organize a seminar, attended by well over one hundred participants, focussing on the construction sector.

#### 4 General promotional activities

With the scope of fostering greater involvement by all stakeholders in all sectors, OHSA organised a seminar in Gozo in collaboration with the Gozo Business Chamber, with the scope of disseminating general information about statutory obligations and the technical means through which such obligations can be fulfilled, and raising awareness about the accruing benefits of having acceptable levels of occupational health and safety at all workplaces.

OHSA made use of funds provided by the European Agency for Safety and Health at Work to produce 13 roll-up posters related to various aspects of occupational health and safety. These posters started being exhibited at suitable locations inside companies and organizations in Malta and Gozo, and cover a range of including slips, trips and falls, the risk assessment exercise, work-related stress, the safe use of chemical agents, noise, ergonomics, heat exposure, the safe use of work equipment, construction safety, manual handling, young workers, pregnancy, and active aging. It is OHSA's intention to exhibit these posters in places which are accessible to, and visited by large numbers of members of the general public, so that an even larger number of persons become aware of the important information displayed on the posters.

Talks are also underway with EU-OSHA so that these posters developed in Malta are used in other member States.

#### 5 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, the Armed Forces of Malta, the wide Public Service, teachers, union representatives and HR managers.

The changes brought about by Legal Notice 348/2011- Work Place (First Aid) Regulations, which permit all first aid instructors to act as service providers resulted in a drastic decline in demand for First Aid Courses delivered by OHSA in collaboration with NGO's such as St. John Ambulance and Malta Red Cross Society. The lack of demand for this particular course as well as an assignment in Manual Handling training which garnered 246 all-male participants, contributed to a female attendee decrease of 61% in the overall gender mix availing itself of OHSA services. OHSA's next most-popular course, the 16 hour training programme for Workers' Health & Safety Representatives, registered a marginal increase by attracting a total of 83 delegates. Overall, a 4.73% drop in participation has been registered.

#### 6 Training for operators of fork lift trucks and cranes

Last year, OHSA entered into discussions with the Chamber of Engineers (CoE) regarding training for forklift truck and crane operators in the principles of safe use of this equipment, with the aim of launching a training course with the involvement of both entities. The course content is to encompass topics related to health and safety including the associated legal aspects – the course will also include training in safe operation, load stability, safety devices, inspection and upkeep, and will 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. 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. It is envisaged that OHSA and CoE will launch these courses towards the middle of 2014.

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

Following discussions with the University of Malta, an occupational health and safety component has been included once again within the Degree-Plus Programme at the University of Malta (UoM) The subject areas covered within this module include the work-health relationship, risk assessment, the legal framework, chemicals, work equipment, ergonomics and construction safety. Practical examples form different places of work were also shared with the students. Following feedback from lecturers and students, for the academic year 2013/2014 OHSA updated the course to cover also, occupational health, new and emerging risks, statistics and the European dimension to occupational health and safety.

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.

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



This website remained popular with safety practitioners and members of the general public, and is used by an increasing number of persons information searching for about different aspects of occupational health and safety in Malta - the number of page views registered for January mid December 2013 is 91,239 (an average of 1,824 hits per week). There were also 14,234 unique visitors (equivalent to 40 visitors per day) throughout the year. Traffic towards the website is made up of 42% returning visitors while 58% are

new visitors. Every visitor spends on average just over 3 minutes per visit.

Occupational Health was added to the sectors area. Content specifically related to this sector was added to this section. An online form was prepared and added to facilitate the notification of occupational diseases to OHSA.

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 2013, access to the Maltese EU-OSHA website remains highly encouraging.

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

During 2013, the European Agency for Safety and Health at Work (EU- OSHA) published the results of a Pan-European survey on two occupational health and safety issues. A number of full-time and part-time workers, and self-employed persons were interviewed in 31 European countries, including Malta, where 495 randomly selected workers took part.

Overall, this third edition of the pan-European survey conducted by Ipsos MORI reveals that over half the workers interviewed believe work-related stress to be common, with job security and job reorganisation cited as the main cause. Respondents across Europe also reported low awareness amongst workers of programmes or policies that make it easier for workers to continue in employment up to, or beyond, retirement age.

Whereas a larger percentage of Maltese workers (62% compared to 51% of all European workers interviewed) believe cases of work related stress are common at their place of work, more Maltese workers consider such cases to be well controlled at work (60% of Maltese workers compared to 54% of all European workers). In so far as work programmes or policies in place which make it easier for workers to remain in employment until or after their age of retirement, only 8% of Maltese workers responded that such programmes or policies are present (12% positive response in the case of all European workers). A substantially higher number of Maltese workers were in agreement that such programmes and policies

are essential (74 % of Maltese workers, compared with 61% of all European workers).

Whereas such surveys only gauge perceptions, they are nonetheless useful tools that can be used in determining policies which need to be developed or formulated. The ageing working population is a case in point, which requires further attention and study, especially with regards to the associated problems and the need to promote healthy ageing at work, focusing on health and safety issues that enable and motivate older workers to remain longer in the labour market. This is one of the ways through which the proportion of older workers remaining in employment can be increased for the overall benefit of society. With these considerations, OHSA intends to draw up a project proposal for potential EU funding in the near future that promotes the highest degree of health and safety in enterprises, particularly among the 55-64 years working cohort, by having better informed employers and safety practitioners, who will also be taught on how to include the specific requirements of this age-group in the overall OHS enterprise preventative and protective measures, including when carrying out statutory risk assessments.

#### **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 adequately control risks at their place of work. This can be achieved if duty holders take action which is 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 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.

During 2013, 160 letters of intimation were issued (232 letters were issued during 2012) with a total of  $\in$ 64,900 being imposed ( $\in$ 97,000 in 2012). There are various reasons behind such a marked reduction – the 2012 figure includes a number of contraventions which occurred in the preceding year. At the same time, it

has been the general experience of OHS Officers who report a slightly improved rate of compliance in the construction sector with regards to a number of unsafe practices associated with a higher degree of risk. At the same time, a larger number of duty holders who have a statutory obligation to send prescribed documentation to OHSA relating to various machines or items of equipment (for example hoists, lifts, boilers or cranes) appear to be more likely to comply with their obligations, especially if they had been fined in the previous year.

Despite OHSA's limited experience in the implementation of this system and the relatively short period which would allow a more meaningful appraisal of the system, a few preliminary conclusions can still be made: the system appears to have achieved its primary objective of increasing overall compliance, at least in some areas. Secondly, OHSA's reliance on the Courts of Law to achieve compliance by duty holders has been reduced dramatically, since the number of ohs dedicated court sessions has been reduced by one to four (two annual sessions in Malta and two in Gozo).

On the other hand, the implementation of the system has created more back office paperwork as well necessitated the development of a number of Standard Operating Procedures which cover diverse aspects of the system. These SOPs are considered essential by OHSA so as not only to ensure transparency and equitability in the way that the system operates, but also to ensure a proper audit trail from the time that the fine is issued to the time that the money collected is deposited with the Authority's bank. Last but not least, the Authority devised another SOP aimed at giving an adequate level of protection for its members of staff who handle cash generated through this system of fines.

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.

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

OHSA had 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 retain and meet last years target 98% of the time.

There has also been a slight increase in the number of requests for information by members of the public, particularly workers, especially through the use of electronic mail with considerably more than a thousand being received during 2013. Invariably, the information requested was supplied by OHSA on the same day that it was received; other more complex requests, especially where they involved a workplace visit, 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: Hairdressing sector

During 2013, the OHS Authority carried out a proactive information and inspection campaign targeting the hairdressing sector. The primary scope of this campaign was to ensure that hairdressers had all the relative information and guidance as would allow them to work in, and to provide a safe environment themselves and their clients. During the course of the campaign OHS Officers visited around 600 different hairdressing salons. Apart from distributing information material, the Officers looked for the presence of uncontrolled risks arising from exposure to dangerous chemicals, inadequate ventilation, and prolonged hours of work and standing, as well as the level of protection of the unborn child and/or breastfeeding mothers working in this sector. Other deficiencies that were noted concerned the absence of relevant information about cosmetic products in use and the intermittent use of personal protective equipment.

Both before as well as during the campaign, OHSA passed on information about the most common prevailing risks to those organisations representing hairdressers, which was also circulated to their members.

For logistical reasons, hairdressers who do not operate in a salon but visit clients at their residence were not included in this campaign.

#### 4 Notification of injuries and accident investigation

OHSA received 541 notifications from employers concerning injuries which result in a worker being incapacitated for work for more than three consecutive days or which resulted in the injured worker being hospitalised for more then 24hours beyond the period for observation.

#### 5 Construction notification forms

OHSA processed 340 Construction Notification Forms received in accordance with Legal Notice 281 of 2004. OHSA continues to register a higher adherence rate by developers ('clients' in terms of the relevant legal notice) both in Malta as well as 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.

#### 6 The construction sector

As in previous years the construction sector remains a focus of attention for the OHS Authority, primarily since this sector is associated with the highest injury rate when compared with other industrial sectors. Throughout the year, OHS officials carry out a number of routine inspections, either in a proactive manner, or as a result of a complaint (usually from third parties). Almost all construction site inspections are routinely followed up by further inspections to ensure compliance with the law, and, or with the Orders that may have been issued.

On a positive note, larger contractors appear more receptive to OHSA's approaches and the messages that it conveys 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

All regulatory activities in EU member states are based on the EURATOM Treaty. The Treaty is one of the founding Treaties of the European Union and was created in 1957. Two important aspects of the Treaty which are of greater relevance to Malta are the objective of guaranteeing high standards of safety for the public and workers and to ensure that nuclear material is not diverted from civil to military use.

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 / monitoring of the environment and fulfilling Maltese obligations under the nuclear related treaties of the International Atomic Energy Agency.

OHSA is the lead entity in RPB, providing administrative support, and coordinating the activities of the constituent entities through the work of its Radiation Protection Section. Five formal RPB meetings were held during the 2013. To allow for better management of the radiation regulatory data, the International Atomic Energy Agency (IAEA) provided Malta dedicated computer equipment and regulatory database software in 2013. The new equipment and software went operational in October 2013.

Currently the national inventory of users of all sources of ionizing radiation, which is updated and maintained by RPB stands at 205 (a decrease of five since the last report). Inspections being carried out by the Radiation Protection Section focus on medical establishments with a view to issue formal authorisations (licences) in terms of legal notice 44 of 2003.

The Radiation Protection Board review of the existing National Environment Radioactive Surveillance Plan was finished and approved in June 2013.

Regulations 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 were published on 16th July 2013 as Legal Notice 186 of 2013. A radioactive waste policy and strategy document is required by the Directive and this is currently being drafted.

To allow Malta to sign the Revised Convention on the Physical Protection of Nuclear Material Nuclear Safety and Radiation Protection (Amendment) regulations were published on 16th July 2013 as Legal Notice 187 of 2013.

The Radiation Protection Board hosted an IAEA "Interregional Workshop on Trans-boundary Movement of Scrap Metal and other Commodities that inadvertently contain radionuclides" in June 2013 The workshop was very successful and was attended by 29 representatives from Malta, Albania, Bosnia and Herzegovina, Croatia, Cyprus, Egypt, Ghana, Greece, Jordan, Lebanon, Libya, the Former Yugoslav Republic of Macedonia, Montenegro, Morocco, Nigeria, Slovenia, Tunisia, Turkey, and Tanzania. The Maltese Customs Department were actively involved in this workshop and arranged for a visit and demonstration of their work at Malta Freeport.

As part of the RPB's on-going collaboration with the Maltese Customs Department, OHSA's Radiation Protection Section has assisted the Department in developing its response to the detection of contaminated goods in transhipment through Malta Freeport - on the detection of radioactive material within a shipping container arrangements are made for the return of the goods to the country of origin.

The Radiation Protection Board has already submitted the Maltese report to IAEA for the sixth review meeting on the Convention on Nuclear Safety which will be held in 2014.

Planning and organisation has already started in preparation for an international peer review of the radiation / nuclear regulatory structures within Malta, to be coordinated by the IAEA and which is scheduled to take place in 2015.

#### 8 Machinery, equipment, plant and installations

The main functions of the responsible section at OHSA, MEPI, are the implementation and enforcement of those regulations related to all types of machinery used at the workplace and the Control of Major Accident Hazards (COMAH) Regulations. Certain types of machines are statutorily required to be tested and certified by a competent person at regular intervals. Copies of these reports are received and vetted by MEPI and then entered into its dedicated database. At the end of this year, the number of entries related to the various types of machinery and equipment in the database was 6541. These include 3026 lifts, 831 cranes, 442 boilers, 1098 forklift trucks, and 1144 are listed as other equipment. The number of examination reports received in 2013 totaled 6168, 4372 for lifts, 167 for cranes, 120 for boilers, 517 for forklift trucks and 992 for other equipment. Officers from this section are also often called to investigate accidents involving machinery.

This section was also actively involved in the two seminars organised by OHSA concerning crane erection and examination and their safe operation, which was followed up by the development of a set of "Guidelines for Lifting Persons with Cranes". These were published on the OHSA's website and later presented during another seminar for building contractors and health and safety professionals.

The negotiations at EU level on the Electromagnetic Fields Directive were concluded this year and the directive was published in the Official Journal of the EU on the 26<sup>th</sup> June 2013. This directive needs to be transposed into local legislation by the 1<sup>st</sup> July 2016.

Early in 2013 a working group (WG) on land-use planning (LUP) consultation zones (CZs) was set up with members from OHSA, MEPA, the Civil Protection Department and the Malta Resources Authority. The terms of reference for this WG included the establishment of a set of criteria and guidelines for the preparation of the CZs for COMAH sites. The WG prepared a proposal for a plan of action which was approved by the entities concerned, which included the engagement of a foreign expert to assist the WG with the tasks involved.

Following contacts with the Major Accident Hazards Bureau (MAHB), and at OHSA's request, an official from this institution came to Malta to conduct a case study involving two COMAH sites. The exercise included the gathering of information regarding major accident scenarios, frequencies, meteorological data and population data so as to plot the consultation zones for the two COMAH sites using software specifically developed by the Commission (ARIPAR).

Various meetings were held with Enemalta officials and consultants regarding the new LNG terminal and power station to be built near the existing Delimara Power Station, which is already a COMAH site. OHSA engaged a foreign consultant to assist it with the evaluation of the proposed methodology and safety report.

The Seveso III Directive which was published last year contains an amendment regarding the classification of Heavy Fuel Oil that also needs to be transposed into the Maltese regulations. The main reason for the revision of the Seveso II Directive is to align its Annex I to Regulation (EC) No. 1272/2008 on classification, labelling and packaging of dangerous substances and mixtures which amends and repeals Directives 67/548/EEC and 1999/45/EC to which the Seveso II

Directive currently refers. Currently there is no agreement on a harmonised approach to the classification of Heavy Fuel Oil (HFO) under SEVESO II. This led to a different interpretation on the level of control by operators in different Member States. With the recent amendments to the Classification, Labelling and Packaging (CLP) Directive, HFO would be included in the category of substances "dangerous for the environment" under SEVESO II, with a threshold of 200 tonnes, meaning that operators with a storage of 200 tonnes or more of HFO would have to comply with the provisions of SEVESO II.

As a countermeasure, and due to the wide use of HFO in industry, it was decided at EU level to include HFO in the list of substances which fall within the scope of the SEVESO II Directive with a threshold of 2500 tons. As a result, the Control of Major Accident Hazards (COMAH) Regulations L. N. 37/2003 (S.L. 424.19) has to be amended accordingly. OHSA embarked with a wide-ranging consultation process involving duty-holders as well as a large number of other stakeholders.

Another initiative taken by the MEPI section was to collaborate with the Malta Competition and Consumer Affairs Authority (MCCAA) on the safety of locally manufactured stone cutting machines. Research was carried out to identify the types of machines used in the local construction industry and their technical specifications, which were later compared with international standards. It is envisaged that a seminar will be held early next year, in collaboration with MCCAA for the manufacturers with the aim of making these machines safer for workers.

#### 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.

OHSA participated in a seminar organized by the Malta Employer's Association, in which OHSA's document was explained at great length to the organisation's members.

#### 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.

OHSA continuously provides advice to duty holders of when and how health surveillance is to be carried out. In particular, OHSA has become a point of reference for medical practitioners, who often seek advice on the examination parameters indicated to be used in the case of specific exposures.

#### 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.

Unfortunately, there still remains a problem with regards to the notification of occupational diseases, which remain largely not notified to OHSA, while no claim for benefits arising out of the Social Security Act is made with the Department for Social Security (DSS). Despite the various initiatives already taken in this regard by OHSA, few notifications are sent – in fact the numbers are so low that they cannot even be used for statistical analysis to estimate the real prevalence of occupational diseases in Malta.

One of the main reasons why official notifications are not sent is the reluctance of examining physicians to fill-in a notification form, as it is seen as a bureaucratic burden. On the other hand, workers appear not to know their rights and entitlements arising out of the Social Security Act, and therefore often refrain from asking their examining doctor to fill-in the form.

In an effort to address the first issue, and increase the notification rate of occupational diseases OHSA has worked to set up an online reporting system to enable doctors to report cases of occupational diseases by filling in an online form.

29

Ideally, with the consent of the worker, the doctor should include the personal details of the worker concerned in order to investigate the case. This system was launched towards the end of the year, after all practicing physicians had been informed of this new initiative electronically and through a circular issued by the Superintendent of Public Health. Hopefully this system would encourage doctors to report occupational diseases more.

Occupational Disease Reporting Form
Guidelines to fill out form:
Diagnosis/Symptom(s) Diagnosis or symptom(s) (if diagnosis not yet known), giving sufficient information E.g. noting locations in musculoskeletal cases (elbow, neck etc.) For further guidance please refer to the following documents on website: 1. The key criteria for diagnosing an occupational disease in any individual 2. European schedule of occupational diseases
Name of Employee, ID number and contact number These are optional and can only be submitted to OHSA with the patient's consent. Provision of these personal details will enable OHSA to investigate this report with the aim of protecting the employee and other work employees from further exposure to the suspected agent and thus preventing further harm.
Job Please enter the job title (e.g. Nurse, Teacher, Welder).  Please write the type of work at the time of exposure to the task/event/suspected agent.  This may not be the present job.
Task/Event/Suspected Agent(s) Please be as specific as possible e.g. 'fork-lift operator' not 'factory work', 'difficulties with colleagues' not 'work stress' or 'fibre glass' not 'irritant dust'.
NB. THIS OCCUPATIONAL DISEASE REPORTING FORM IS NOT LINKED TO COMPENSATION ISSUES
* Required
Enter Date you saw the patient * dd/mm/yyyy This is a required question
Diagnosis/Symptoms *

#### 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

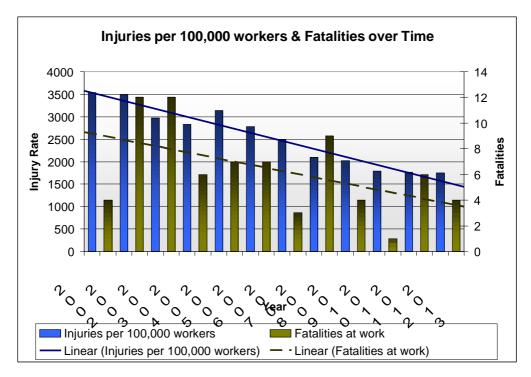
been filed), remain evident. Whereas it can be argued that there are a number of injuries which are not notified and which therefore are not included in the official statistics on work related injuries, on the other hand it can also be assumed that this number remains constant throughout the years. From 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 figures for 2012 and 2013 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 and 2013 will be included in the 2014 report.

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

	Employed population <sup>1</sup>	Injuries at work <sup>2</sup>	Injuries per 100,000 workers	Fatalities at work <sup>3</sup>	
2008	161,239	4,023	2,495	3	
2009	160,771	3,366	2,094	9	
2010	164,223 3,314		2,018	4	
2011	168,711	3,024	1,792	1	
2012	172,701	3049 (unrevised) 1,766		6	
2013	176,862	3092 <sup>4</sup>	1,748 <sup>4</sup>	4	

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



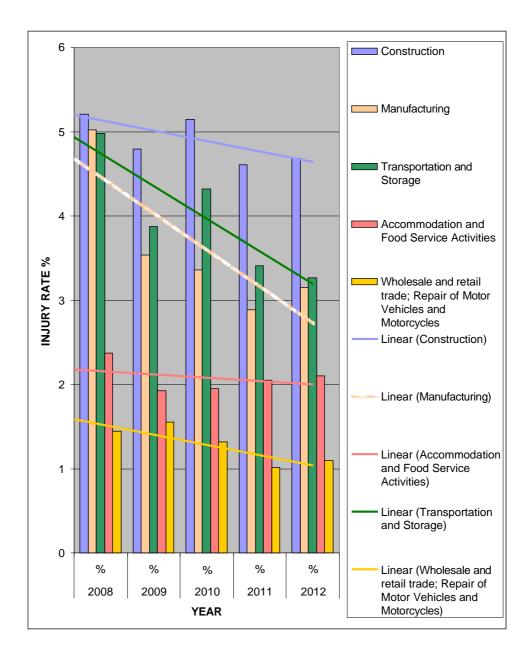
The following diagram shows in a pictorial manner how both injury rates and the numbers of annual occupational fatalities have been showing a persistent downward trend since 2002, which is the year when OHSA started its operations.

During the period January 2013 – December 2013, 4 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.

Similar trends were noticed in the rates of injuries for the largest economic sectors. These rates were obtained through an analysis of the number of injuries occurring in each of these sectors, which was then divided by the number of workers in the same sector (based on the Labour Force Survey for the same year).

	Injury rate - Sectoral				
	2008 %	2009 %	2010 %	2011 %	2012 %
Construction	5.21	4.79	5.15	4.61	4.68
Manufacturing	5.02	3.54	3.36	2.89	3.15
Transportation and Storage	4.98	3.87	4.32	3.41	3.27
Accommodation and Food Service Activities	2.37	1.92	1.95	2.05	2.1
Wholesale and retail trade; Repair of Motor Vehicles and Motorcycles	1.44	1.55	1.32	1.01	1.1

An analysis of these sectoral rates shows that whereas all five economic sectors registered a drop in the prevailing injury rates during the period 2008 - 2012, the biggest drops were registered in the Manufacturing Sector and in the Transportation and Storage Sectors. In all five years under review, the Construction Sector was associated with the largest injury rates.



#### 11 Prosecutions conducted by OHSA

Judicial prosecutions continue to be carried out by the Authority mainly before the Court of Criminal Judicature. OHSA also continues its collaboration with the Executive Police, in those cases brought by the Police and also appointed before the Courts of Criminal Judicature - 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 2013, the Authority prosecuted in a total of 98 criminal cases, of which 15 cases have been decided. Five of the fifteen decided cases are of particular interest since suspended imprisonment judgements were handed down in three of these cases, while in the other two cases the maximum pecuniary fine (*multa*) of  $\in$ 11,650 was applied. The court in total handed down fines amounting to  $\in$ 51,800. The number of cases appointed before the court is lower than that of last year as a result of the implementation of the administrative fine system. However, despite the decrease in the number of cases being appointed, the total amount of fines applied is greater than that of last year.

Furthermore, OHS Officers were summoned to testify in seventeen civil cases initiated by the injured parties seeking compensation from their employers or insurance companies. The outcome of these civil cases, which relies heavily on the findings of OHSA's investigation of the cases involved, has seen a substantial increase in the amounts awarded by the Courts in compensation. Apart from these court judgements there are numerous out of court settlements whereby insured companies agree to compensate the victims of an accident at the place of work.

#### 12 DSS investigations.

As in previous years a number of claims for benefits in terms of the Social Security Act, were referred to OHSA for investigation, in accordance with 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 the first quarter of 2013 Malta Enterprise continued to run its MicroInvest scheme which was 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 were being supported through a tax credit representing a percentage of the eligible expenditure and wages of newly recruited employees and, or apprentices.

Microlnvest support by Malta Enterprise covered investments undertaken on various areas including furbishing and upgrading of business premises for improved operations, machinery or technologies to improve operations, machinery or technologies which save or generate energy, investments which enable compliance with regulations, including Health & Safety, Environment Directives and Physical Access, Cost of one commercial vehicle as long as such vehicle is involved in the transport of goods and wage costs for new jobs created and/or apprenticeships taken. (Source: Malta Enterprise website:

http://www.maltaenterprise.com/en/support/microinvest).

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 of initiatives specifically targeting 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.

As announced by the Minister of Finance during the last Budget, this scheme will be relaunched during 2014.

#### 14 Asbestos in workplaces

Since the introduction of specific regulations (namely Legal Notice 323 of 2006) intended to protect workers from the risks related to exposure to asbestos at

work, documentation concerning asbestos removal projects has been submitted through the notification procedure as administered by OHSA in compliance with Regulation 4 of the said regulations. When Regulation 4 is not applicable to an asbestos removal project e.g. where worker exposure is sporadic and of low intensity, and if the results of the risk assessment show that the exposure limit for asbestos will not be exceeded, then an employer is only required to submit to OHSA a plan of work (as per requirements of Regulation 11). In total, documentation relating to seventeen asbestos removal projects has been submitted during 2013. These projects involved the handling of various forms of asbestos containing materials such as corrugated asbestos cement, drain pipes, asbestos containing soffit tiles, asbestos removal was submitted for marine installations, public sites, factories, large warehouses and historical sites.

## 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 prepared legal notices to allow Malta to join: the Joint Convention on the Safety of Spent Fuel Management and on the Safety of Radioactive Waste Management; transpose Council Directive 2011/70/Euratom on establishing a Community framework for the responsible and safe management of spent fuel and radioactive waste and be able to sign up to the Amendments to the Convention on the Physical Protection of Nuclear Material.

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 (MAHB) of the European Commission for possible assistance and training in carrying out risk analysis and preparation of consultation zones for COMAH sites using the Area Risk Assessment and Management software (ARIPAR), developed by MAHB. It is envisaged that a case study will be carried out jointly with MAHB on one of the local COMAH sites.

# 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.

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, OHSA prepared one departmental tender relating to the provision of legal services for publication by the Central Procurement and Supplies Section at MFH. A similar tender for legal services was the subject of an appeal during 2013, which 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

Staff development included the participation of a number of its delegates on a procurement regulations course while all members of staff were introduced to the Employee Support Programme for Public Employees (ESF 4.97). 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 the development of organisational skills.

As of 2013, OHSA embarked on a continuous development programme for all its members of staff. This entails the organisation of regular sessions held at OHSA premises where topics of interests are discussed. During 2013, the subjects covered included an overview of OHSA, its statutory roles and functions, the Control of Major Accident Hazard Regulations, fire safety, and ionising radiation.

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.

## 2 Recruitment

Up to the end of 2013, the total human resource complement stood at 27. 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. During the year under review, the Authority lost one of its technical officers on attachment to a Ministerial Secretariat. During the third quarter, the Office of the Chairperson engaged two employees, a full timer who has since been deployed to Driver/Messengerial/Receptionist duties, and a Part-timer as PA to the Chair. Both are engaged on two year contract. 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, OHSA did not benefit from the deployment of participants from the ETC's traineeship schemes, or student placement programme or any other another source of support staff which occasionally also adds an element of cultural diversity during the period under review. Implementation of family-friendly measures, tough as they might be to implement considering the size

40

of the organization, consisted amongst others of maternity leave, parental leave, career breaks, reduced hours, urgent leave and bereavement leave.

## 3 Internal industrial relations

This year, OHSA's employees continued to benefit from the 2011-2016 Collective Agreement. 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 necessary consultation with OHSA's workers is finalised.

# 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. Meetings of the COMAH Competent Authority are also held at the OHSA's premises.

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 27, of whom 6 (23.07%) were female.

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).

42

Two female personnel are benefiting from Family Friendly Measures (one on a Career Break and the other on Maternity Leave), while two other female employees are benefiting from reduced hours.

## 6 Assistance provided to the Authority

## 6.1 ERDF – installation of photovoltaic panels

Following last year's preparatory work which enabled OHSA to have an indication of the potential in the field of renewable energy generation, OHSA formally applied during 2013 for EU funding under Call 18 of the European Regional Development Fund (Priority Axis 4: Climate Change and Resource Efficiency) to install a number of Photovoltaic panels on its use and address energy efficiency in its operations. The main objective of the project is to reduce OHSA's reliance on non-renewable energy sources and to make better use of energy being produced, while minimising waste. The project proposal focuses on a number of interventions including:

- the installation of thirty-eight PV panels, each with a minimum of 265Wp for the generation of solar power on OHSA's roof, connected to a 10kVA three phase inverter, and
- the installation of a number of energy efficiency measures such as a centralised monitoring and control system for air conditioning systems, the installation of door contacts to disable air conditioning units in case an aperture is open, the installation of presence and photocell local lighting on air conditioning unit control units.

If the project proposal is approved, the interventions will be expected to result in the annual production of approximately 14,500kWh of solar energy, reducing OHSA's consumption of conventional energy by around 50% and leading to an anticipated annual saving of 33,168kg in CO<sub>2</sub> emissions.

These measures will be installed in conjunction to the ones already mainstreamed in OHSA's day-day operations including the designation of a Senior Manager as OHSA's Green Leader who issues memos on various green topics to staff from time to time (recycle unwanted material, 'do not print but download' approach, recommendation to use stairs instead of lifts etc) and who ensures that members of staff grasp OHSA commitments in this field; the implementation of a waste separation and recycling system, including the use of bring-in sites for waste generated by the OHSA; the installation of solar films an all OHSA's fenestration, by which up to 99% UV penetration is being deterred; tree planting activities carried out by in commemoration of OHSA's 5<sup>th</sup> and 10<sup>th</sup> years in operation; use of low emission leased vehicles and the installation of low consumption lighting throughout the premises.

# 6.2 ESF 3.230 - 'Partnering employers to improve occupational health and safety'

During the 3<sup>rd</sup> Quarter of 2013 OHSA submitted an application for funding under the European Social Fund, aimed at improving levels of OHS in Malta by partnering employer bodies for the delivery of an awareness campaign. To this end the main private and public employers' representatives were officially approached to partner OHSA and to participate in this project. With satisfaction OHSA reports that most major associations accepted OHSA invitation.

A number of activities were planned though this project including:

- (a) The production of a number of publications on OHS, in print and in electronic format and their dissemination to project partners and to employers
- (b) The creation of a webpage within OHSA's corporate website solely dedicated to this project and its aims, where all project related material would be allocated and made freely accessible to all interested parties;
- (c) The preparation of a number of technical write-ups and their publication in all local newspapers;
- (d) The organization of a number of information sessions with employers' representatives to discus relevant OHS themes and;
- (e) The development of five short video clips about different aspects of OHS, which videos would be uploaded on YouTube.

Following evaluation of this proposal by the Project Selection Committee, OHSA was subsequently informed that its project was accepted by the Planning and Priorities Coordination Division (PPCD). Unfortunately, due to limited funding available under this Priority Axis, OHSA's proposal could not be funded at this stage and as a result, this was placed on the reserve list. Should funding become available in the near future, the Managing Authority will inform OHSA accordingly.

Although OHSA remains interested to launch this project, considering the tight timeframes that a late launch may entail as well in view of conclusion of programming period it will be difficult to implement this project considering that OHSA envisaged that contract should be awarded by early 2014.

# 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<sup>nd</sup> October 2008, so that each Member State is represented by one Committee member (instead of the previous 2).

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 2013 under the auspices of the Irish and the Lithuanian Presidencies. The Thematic Day held in Dublin (Ireland), on 21st May 2013 discussed the use of ICT Systems and Labour Inspection, with practical examples being given in how ICT systems could be used to prioritise inspections, and to record findings. The OHSA representative at this meeting was appointed as Moderator for one of the sessions. The meeting also discussed the possible use of social media sites as a means for ohs inspectorates to keep in touch with potential clients and stakeholders, while disseminating information and promoting ohs in general.

The subject of the Thematic Day held in Lithuania on the 14<sup>th</sup> November 2013 was "*Investment in Health and Safety: Economic Slowdown vs. Decent Work*. The meeting addressed the impact of the economic slowdown processes upon investments by employers (both financial and intangible). OHSA's representative was invited to deliver a paper on the subject, focusing on OHSA's initiatives to invest in its human resources, and to obtain as realistic a picture as possible of the levels of occupational health and safety and the resultant societal cost of non-compliance. The paper discussed the importance of the research carried out, which allowed OHSA to refocus its actions, so that greater attention could be given to those areas or sectors which required greater attention.

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.

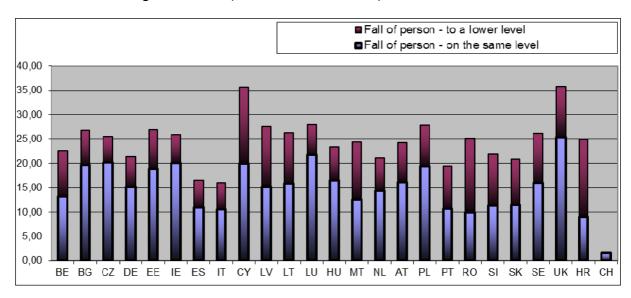
SLIC is also tasked by the Commission to evaluate OHS Inspectorates in the respective Member States to ensure that they are implementing the full acquis on ohs. During 2013, a member of OHSA was involved in the evaluation of the Polish

Labour Inspectorate. A full report of the evaluation exercise of the Polish Inspectorate will be provided to SLIC for onward transmission to the EU Commission.

# **1.1** Campaign for the prevention of slips, trips and falls

Slips, trips and falls are the largest cause of accidents in all sectors, from heavy manufacturing to office work. Across the European Union, the relative importance of such cases of all work accidents is 24%.

According to the publication "Causes and Circumstances of accidents at work in the EU" (2008), falls on the same level are responsible for about 14% of all accidents resulting in an absence of more than 3 days (up to 15% in 2010). The proportion of work accidents due to falls of all work accidents in 2010 by countries can be seen in the diagram below (source: EUROSTAT).



The economic activity associated with the highest degree of risk is manufacture (24%), whereas in the transport and storage sectors, construction and trade, the relative risk is equivalent to 15%. Falls on the same level are the most frequent cause of work accidents primarily for elderly people (constituting 27% of all work accidents among people of 45-54 years of age, 33% among 55-64 and 45% among people who are more than 65 years of age). Slips and trips may have serious consequences, causing severe injuries such as broken bones or concussion. 35% of cases of incapacity for work last for at least one month.

OHSA started its preparatory work for a prevention campaign for the prevention of slips, trips and falls on the same level to be held during 2014/2015.

This campaign is being organised by the Senior Labour Inspectors Committee in all Member States, including Malta, and is being supported by EU-OSHA. This campaign will have two components, an informative part one targeting workers, and an inspection component, targeting employers. The campaign will also see to the development of educational software depicting situations where slips and trips are possible with solutions to prevent them.

The campaign will focus on a number of economic sectors, including food production, metal-working, health care, Hotels, Restaurants and Catering sector (HORECA), retail / wholesale (storage).

## 1.2 SLIC Labour Exchange

The aim of the exchange was to share practical experiences with representatives of the Inspectorate in Slovakia regarding the use of work equipment, especially the safe erection of cranes, and the examination of cranes and other lifting equipment, operator training and competence, checklists and reporting formats. Two OHS Officers benefited from this exchange.

## 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** 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.

# 4 International Atomic Energy Agency / European Commission (Radiation protection / nuclear issues)

The Radiation Protection Board (RPB) acts as the focal point for the International Atomic Energy Agency's (IAEA) Illicit Trafficking Database (ITDB) .A

total of 146 reports were received and three reports were sent (made in connection with contaminated items detected at Malta Freeport) in the period 1st January 2013 to 31<sup>st</sup> December 2013.

RPB also acts as the focal point for nuclear safeguards activities which includes the obligation to send the necessary reports. It processes environmental monitoring data received from MEPA and the Department for Environmental Health and transmits it to the European Commission on an annual basis.

The RPB hosted the 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.* 

# 5 Seveso II Committee of Competent Authorities (CCA) and Seveso Expert Group

An OHSA representative took part in a seminar and the meetings of the Seveso Expert Group and Committee of Competent Authorities which was held in Vilnius, Lithuania in October. The seminar dealt with the Self-Classification of Chemical Substances in the context of the Seveso Directive. Various speakers from different member states and industry delivered presentations on this subject. A particular issue of concern was that different manufacturers gave differing classification to the same substance. Manufacturers are obliged to supply the Safety data Sheet of a product before this is placed on the market. Therefore the users and authorities are sometimes confronted with very different classifications which make it difficult to decide whether a particular establishment comes under the Seveso Directive. The European Chemical Agency (ECHA) provides a search option in its website where the various classifications of substances can be found. The participants took part in discussions in three separate working groups, the results of which were presented by the rapporteurs.

In the CCA meeting, the Commission presented the new format for the Seveso III reporting for 2015 – 2018. A number of member states said that there were unnecessary details in the questionnaire which posed an added burden on the competent authorities to gather all the information. On the subject of confidentiality, the Commission said that it would be publishing all non-confidential data in eSPIRS

and eMARS (software used by national competent authorities to share information between Member States) and this would be available to the public.

The meeting of the Seveso Expert Group discussed issues related to the exchange of information between member states and the Commission. The delegates were asked to send a short report regarding the progress on implementation of the Seveso III Directive. A particular query was raised regarding the definition of alternative fuels in the text of the new directive since different interpretations were being given to this category of substances. The Commission presented some statistics from the 3-year report on the implementation of the Seveso II Directive, from 2009 to 2011. There are over 10,000 Seveso installations in the EU with the predominant industry being fuel storage. Although Malta has the least number of Seveso sites, it has the highest density with 34 sites per 1000km<sup>2</sup>.

When there is a major accident involving fires, large amount of water is used. It is estimated that in Buncefield, 50% of the firewater seeped into the soil contaminating the ground water. Another problem is old storage tanks that may leak into the ground from their bottom. In the UK some tanks have been refitted by lifting the whole outer shell and lining the bottom with insulating material. This procedure could cost more than half a million euro for each tank.

The Major Accident Hazards Bureau reported that there are a total of 888 reports in the accident reporting system, eMARS, 10 of which were uploaded this year. The Commission encouraged the delegates to report all major accidents and near misses and give accounts of the lessons learned from such occurrences.

## 6 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), third party violence and harassment (2010), the prevention of sharp injuries in the hospital and healthcare sector (2010) and the protection of occupational health and safety in the hairdressing sector (2012).

In the case of the latter Agreement, the EU Commission announced in its Communication on regulatory fitness and performance (REFIT) of 2 October 2013, that during the present mandate, it would not bring forward a proposal to the Council for legislative implementation of the European sectoral social partners' framework agreement on the protection of occupational health and safety in the hairdressing sector. At the same time the Commission confirmed that it would continue the assessment of the agreement as announced previously. To support the analysis of the added value of the agreement, the Commission has contracted an external study to collect background information on the hairdressing sector, gather medical- scientific data and estimate the costs and benefits of the provisions of the agreement.

# 7 Presidency Conference: 'Small Business & Occupational Safety & Health – the challenge and the opportunity'

During April 2013, OHSA participated in the Irish Presidency Conference on Health and Safety at Work which was held in Dublin, Ireland. The conference afforded the opportunity to discuss how small and micro businesses can protect their workers whilst remaining profitable and growing their business. These twin objectives complement each other. The OHSA representative was invited to take part in a panel discussion on how such aims are being addressed.

The conference debated issues of challenge for such businesses - how the legislation impacts them, and the advantages that can be gained for these businesses when they successfully manage safety and health. The conference also heard of case studies of success from small companies and learned about the tools and supports that can make a difference and make the task simpler for businesses.

# 8 EU Commission questionnaire – Practical implementation of the Directives on OHS in the Member States

According to article 17 (a) (1) of the Framework Directive, the Member States are required to submit a report to the Commission, every five years, on the practical implementation of the Directive and of any other individual Directive. By means of Council Decision C2011/9200, the Commission had defined the structure and content of a standard questionnaire to be used by all the Member States. The first report to be submitted to the Commission covers the period 2007 – 2012, and includes 24 directives in all.

OHSA, in collaboration with the Policy Development, EU and International Affairs Directorate within the Ministry of Health and the Office of the Permanent Representation of Malta to the European Union, worked extensively to provide all the requested information, and managed to submit the replies to the questionnaire in good time before the deadline established by the Commission. In drawing up the replies, OHSA sought the views of the social partners represented in its Board, who signified their acceptance thereof. OHSA also coordinated the replies from Transport Malta, the Malta Competition and Consumer Affairs Authority, the Ministry for Sustainable Development, Environment and Climate Change and the Ministry for Infrastructure.

## **9** 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. Two officials from OHSA have been appointed to sit on this Committee this year.
- 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.
- 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 and provides

advice 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 the 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. During 2013, OHSA continued its participation in the Council as well as in BICC's working group discussing Building Regulations & EU Directives. OHSA and BICC also discussed other mutual areas of concern including the role of the construction project supervisors, skills training and amendments to the construction health and safety regulations. BICC facilitated a meeting between OHSA, the Kamra tal- Periti and the Faculty of Architecture at the University of Malta and MCAST, during which the role of the architect within the spirit of current ohs construction legislation and training for project supervisors were discussed.

#### 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. The standard was launched by the MCCAA for consultation earlier this year and the final, accepted version is in the process of being published.

#### • 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. During 2013, OHSA delivered a presentation to the network partners about its remit and function, as established by law and about enforcement and other interactions it conducts with duty holders, particularly punitive action and powers given to its OHS Officers by law.

# 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, OHSA maintains 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.

In so far as employment issues are concerned, OHSA remains guided by those policies established by the Office of the Prime Minister (and the Public Administration Human Resource Office (PAHRO)) from time to time, including on matters concerning salaries (these are determined by the Public Administration Collective Bargaining Unit - PACBU with reference to equivalent public service salary scales) other conditions of employment and recruitment, finances, information systems and public procurement. During the fourth quarter, OHSA's Corporate Services assisted a team from the Internal Audit and Investigation Department (IIAD) to carry out evaluation and testing of OHSA's procurement and recruitment procedures as well as other policies addressing issues of Corporate Governance.

# 3 Corporate Social Responsibility

The Authority accepted a number of bookings for 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.

# G OHSA's financial situation

By the end of 2013, OHSA ended its financial year with a surplus of €104,821, resulting from an increased income and a decrease in its operational expenditure.

1. The Authority's income for the year increased as a result of a larger Government recurrent grant, which was only confirmed towards the end of the year, and better revenue generation over the preceding year.

2. Expenditure on personal emoluments increased by €41,000 as a result of collective agreement measures and the recruitment of additional members of staff. Savings were made as a result of the postponed return of one member of staff who continues to benefit from family friendly measures.

3. Savings were obtained in the case of OHSA's operational expenditure  $(\in 33,000)$  as a result of substantial cost control measures implemented by OHSA with regards to legal and accountancy services. Further savings were made in the Authority's utility bills and overseas travel expenses.

4. Whereas the above figures reflect the **actual** savings over last year's performance, it may be noted that other savings over the **bugdeted** figures resulted due to the uncertainty of availability of funds. Furthermore, capacity building measures which included the recruitment of 2 technical and one clerical personnel projected for implementation during the fourth quarter were dropped.

5. Part of the budgeted expense for 2013 needs to be carried over to next year this includes  $\in$ 7,000 for technical consultancies,  $\in$ 17,000 in repairs and maintenance required to address repairs to the airconditioning system, lift and other general maintenance and improvement to the premises in order to combat water penetration.

6. OHSA plans to request that the amount of €25,000 from the surplus as at 31st December 2013 will be transferred to the year 2014 and a request for virement will be formally made in order to utilise such funds for the much needed capital expenditure for IT server replacement and upgrade of its telephone system and software.

# Annex 1: Key Activities carried out by the Authority

		Gender disaggregated statistics with respect to beneficiaries	
	Total	Females	Males
Workplace visits	2696	n/a	n/a
Equipment certificates vetted *	6168	n/a	n/a
Radioactive Material cleared for import	277	n/a	n/a
Staff development hours	126	2	124
Staff development by employee	15	1	14
Hours of training delivered	263	44	219
Number of participants at OHSA training	403	49	354
Number of courses organised	35	n/a	n/a
Press releases / feature articles	30	n/a	n/a

January 2013 – December 2013

\* Including 4372 lift certificates, 167 crane certificates, 517 forklift truck certificates,

120 boiler certificates, and 992 certificates for other equipment.

	Legislation	Reference
1	Act XXVII of 2000, Occupational Health and Safety Authority Act	Cap. 424
2	Nuclear Safety and Radiation Protection (Amendment) Regulations	L.N. 187 / 2013
3	Management of Radioactive Waste Regulations	L.N. 186 / 2013
4	Work Place (Minimum Health and Safety Requirements) (Amendment) Regulations	L.N. 437/2012
5	Protection of Maternity at Work (Amendment) Regulations	L.N. 436/2012
6	Protection of the Health and Safety of Workers from the Risks related to Chemical Agents at Work (Amendment) Regulations	L.N. 53/2012
7	Occupational Health and Safety (Payment of Penalties) Regulations	L.N. 36/2012
8	Work Place (First Aid {Amendment}) Regulations	L.N. 348/2011
9	Convention on Nuclear Safety Regulations (Amendment) Regulations	L.N. 299 / 2011
10	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
11	Convention on Nuclear Safety Regulations	L.N. 440 / 2007
12	Inspection of Lifts Regulations	L.N. 231 of 2007
13	Treaty on the Non-Proliferation of Nuclear Weapons (Euratom Safeguards and Additional Protocol) Regulations	L.N. 182 / 2007
14	Protection of Workers from the Risks related to Exposure to Asbestos at Work Regulations	L.N. 323 of 2006
15	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

16	Control and Security of High-Activity Radioactive and Orphan Sources	L.N. 13 of 2006
17	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
18	Control of Major Accident Hazards (Amendment) Regulations	L.N. 6 of 2005
19	Protection of Young Persons at Work Places (Amendment) Regulations	L.N. 283 of 2004
20	Work Equipment (Minimum Safety and Health Requirements) Regulations	L.N. 282 of 2004
21	Work Place (Minimum Health and Safety Requirements for Work at Construction Sites) Regulations	L.N. 281 of 2004
22	Nuclear Safety and Radiation Protection (Amendments) Regulations	L.N. 173 of 2004
23	Work Place (Minimum Requirements for Work) (Confined Spaces and Spaces having Explosive Atmospheres) Regulations	L.N. 41 of 2004
24	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
25	Protection of Workers from Risks related to Exposure to Biological Agents at Work Regulations	LN 228 of 2003
26	Protection of the Health and Safety of Workers from the Risks related to Chemical Agents at Work, Regulations	L.N. 227 of 2003
27	Protection of Workers from the Risks related to Exposure to Asbestos at Work Regulations	LN 123 of 2003
28	Regulations on the Protection of Workers from the Risks related to Exposure to Carcinogens or Mutagens at Work	LN 122 of 2003
29	Minimum Requirements for the Use of Personal Protective Equipment at Work Regulations	LN 121 of 2003
30	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
31	Nuclear Safety and Radiation Protection Regulations (issued under Cap. 365).	LN 44 of 2003
32	Control of Major Accident Hazard Regulations	LN 37 of 2003

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

	€	c
Incomo	E	€ 067 525
Income		967,525
Personal Emoluments		
Staff Salaries	623,338	
Honoraria to OHSA members	36,338	
NI Contributions	52,239	
Overtime / Allowances / Statutory Bonuses	77,383	
		789,298
Operational Expenses		
Utilities	26,000	
Material & Supplies	7,570	
Repair & Upkeep	24,600	
Rent	28	
Subscriptions	500	
Office Services	5,600	
Transport	45,000	
Travel	16,200	
Information Services	1,500	
Contractual Services	30,000	
Professional Services	10,500	
Consultancy fees (LUP, LNG)	37,000	
Social Partners Fund	5,000	
Training and CPD	1,000	
Hospitality	1,000	
Incidental Expenses	500	
Depreciation	18,776	
Transfers from government capital grants	(18,776)	
Total Operational Expenses		211,998

# Annex 3: Budgeted Income and Expenditure Account

1<sup>st</sup> January 2014 – 31<sup>st</sup> December 2014

(Continued on the next page).

(Continued from the preceding page).

€	€
Contributions and Initiatives	
Appeals Board	1,165
Total Budget Cost	1,002,461
Projected surplus / (deficit) for 2014	(34,936)
Projected surplus / (deficit) carried forward from 2013	104,821
Budgeted surplus / (deficit) for 2014	69,885

The Financial Statements of the Authority for the period ending 31<sup>st</sup> December 2013 are being included in a separate report.