



Republic of Bulgaria
ECONOMIC
AND SOCIAL COUNCIL

**OPINION
ON:**

**"PRINCIPLES AND PRIORITIES IN THE NEW NATIONAL PROGRAMME FOR
SAFETY AND HEALTH AT WORK 2022 - 2024
IN THE CONTEXT OF COVID-19"**

(developed by own-initiative)

Sofia, 2021

The Activity Plan of the Economic and Social Council for the second half of 2021 includes drafting of an own-initiative opinion on "Principles and priorities in the new National Programme for Safety and Health at Work 2022 - 2024 in the context of COVID-19".

Drafting of the opinion was assigned to the Commission on Labour, Income, Living Standards and Industrial Relations.

Dr. Ivan Kokalov - CITUB, from Group II and Mariya Mincheva - BIA, from Group I were appointed as rapporteurs.

At a meeting of the commission held on 1 December 2021 the draft opinion was adopted.

At its Plenary Session held on 20 December 2021, the Economic and Social Council approved this opinion.

ABBREVIATIONS USED

ESC - Economic and Social Council

NPHW - National Programme for Safety and Health at Work

SHW - Safety and Health at Work

EU - European Union

EC - European Commission

HSWC - Healthy and Safe Working Conditions

SMEs - Small and Medium-sized Enterprises

ICT - Information and Communication Technologies

EA GLI - Executive Agency "General Labour Inspectorate"

COPD - Chronic Obstructive Pulmonary Disease

WHO - World Health Organization

NSSI - National Social Security Institute

CITUB - Confederation of Independent Trade Unions in Bulgaria

I. Conclusions and recommendations

1. The Economic and Social Council (ESC) approves the priorities set out in the European Strategic Framework for Safety and Health at Work for the period 2021-2027:
 - 1.1. Anticipating and managing changes in the context of the transition to a green economy, the digital transition and the demographic transition;
 - 1.2. Improving the prevention of work-related accidents and diseases and pursuing a "zero mortality" approach to work-related deaths;
 - 1.3. Increasing preparedness to respond to current and future health crises. We support the European Commission that achieving these goals requires a stable social dialogue, greater capacity for research and data collection at Member State and EU level, increased law enforcement, awareness raising and more funding.
2. With the adopted EU Strategic Framework on Health and Safety at Work 2021-2027, the European Commission has called on Member States to update their national strategies for health and safety at work in consultation with the social partners in order to address risks for HSWC and the opportunities related to the environmental and digital transition. ESC emphasizes that the National Programme for Safety and Health at Work for 2022 - 2024 must define the principles and priorities for improving the health and safety of workers in the context of recovery from the Covid-19 pandemic, green and digital transition, economic and demographic challenges and the changing perception of the traditional work environment.
3. ESC considers that the achievement of the objectives of the National Programme for Safety and Health at Work 2022 - 2024 is related to updating the national legal framework in order to overcome the risks to HSWC and opportunities related to environmental and digital transition. It is necessary to develop a methodology/toolkit for risk assessment and management in "green" jobs.

The digitalization of labour leads to the emergence of new professions and new forms of work, as well as a large number of self-employed persons. Measures to protect the health of workers employed in new and atypical forms of work should be part of health and safety legislation. The Programme needs to identify measures and measures to increase the digital skills of workers related to the introduction of new Safety and Health at Work technologies and health and safety challenges that may arise from the accelerated digitalization of labour.

4. ESC expresses the opinion that the Safety and Health at Work Programme should provide HSWC measures resulting from demographic changes, allowing older workers to continue their professional careers in a safe and healthy manner. Demographic changes require timely response and effective action from both state institutions and the social partners and all stakeholders.

The European Commission has adopted a number of documents related to the promotion of active aging, the "silver economy", the mobilization of the potential of the rapidly aging workforce and the promotion of the intergenerational approach.

5. In this regard, ESC calls on the competent state bodies in the field of HSWC to work together with the social partners and to promote the results of their joint activities to adapt the work environment to the specific age needs of different generations in order to promote longer working life and ability to work, and achieving synergies between the efforts of the state and employers organizations and employees¹.
6. The new Safety and Health at Work Programme should encourage the development of gender-related Safety and Health at Work management measures. Although women and men often work in the same sector or profession, their physical and psychosocial risk factors are different and this affects their health and safety at work in different ways.
7. ESC supports measures related to workplace stress. A study by the European Agency for Safety and Health at Work puts psychosocial risk factors at the forefront of the 10 current and future priority issues related to health at work and the research in this area. It was found that the way it works, ie. what the work environment is and the way organizations are managed are the main factors that determine whether a workplace can be stressful.
8. Cancer continues to be the leading cause of work-related deaths in the EU. ESC notes with concern that the fight against cancer in the workplace, its causes and protection measures in our country are not at the level of other EU countries. In our opinion, it is necessary to develop a national strategy to raise awareness among the social partners, to identify specific actions related to data collection, research and analysis of cancer diseases, prevention measures.
9. The National Safety and Health at Work Programme for the next period must propose decisive measures regarding the prevention of musculoskeletal injuries. The Programme should provide opportunities for campaigns to raise awareness of the causes and prevention of musculoskeletal injuries.
10. ESC emphasizes that the National Programme for Safety and Health at Work 2022 - 2024 should provide guidelines for improving the regulatory framework for medical follow-up of workers and early detection of diseases related to work and risks at work.

¹ See Project Joint Actions of the Social Partners to Adapt the Working Environment to the Specific Age Needs of Different Generations, in order to promote longer working life and ability to work, implemented by the Bulgarian Chamber of Commerce, in partnership with the Confederation of Independent Trade Unions and Associates partners Association of Industrial Capital and Bulgarian Chamber of Commerce and Industry: <https://activeageing.bia-bg.com/bg/>

This also requires enrichment of the legal framework regarding the requirements for the quality, activity, responsibility and capacity of the occupational medicine services.

11. ESC believes that the Safety and Health at Work Programme should include clear measures to develop a national Safety and Health at Work information system that is comparable to other EU countries. Its creation will improve the process of collecting data on accidents at work and occupational diseases, as well as the subsequent analysis and analysis of the root causes of each work-related death.
12. In the context of the health crisis, good policies and practices for returning to work after a long illness, quarantine of workers and long-term downtime in the enterprise must be encouraged in order for jobs to be sustainable. For workers wishing to return to work, an appropriate rehabilitation process must be established and gradual and controlled workload and inclusion in the work process, as well as the adaptation of their jobs if necessary.
13. Micro-enterprises and SMEs represent 99.8% of all enterprises in Bulgaria. Many of them do not have the necessary knowledge and resources to fully comply with the requirements regarding HSWC, which is why the implementation of legislation in this area is a challenge for them. According to ESC, the new Safety and Health at Work Programme should identify effective ways to support SMEs - financial and economic incentives, methods for sharing knowledge and expertise through partnerships in supply chains and subcontracting activity.
14. Undeclared work is associated with significantly higher health and safety risks. For workers, undeclared work leads to limited access to health insurance, work in an unfavourable work environment that puts their health and safety at risk. It also limits the possibility for inspections by supervision bodies. Efforts to reduce and prevent undeclared work need to continue, while raising awareness among workers and employers. In this regard, ESC proposes:
 - 14.1 to develop an information tool for self-assessment of the risk of undeclared work, which is freely available to employees and employers and through which they can assess the degree of risk of undeclared work in their employment relationships;
 - 14.2 to increase cooperation and exchange of information between supervision institutions on undeclared work.
15. According to ESC, it is necessary to increase the administrative capacity of the Executive Agency "General Labour Inspectorate" by conducting training of supervision bodies on the changes in the new world of labour caused by green, digital and demographic transitions.
16. In the context of the new HSWC program, ESC recommends:

- 16.1. to assess the relevance of national legislation in the field of safety and health working conditions and, if necessary, to improve it;
 - 16.2. updating the rules for conducting and documenting the obligatory trainings and instructions on safety and health at work;
 - 16.3. introducing electronic documents and elimination of imperative texts for reporting on Safety and Health at Work activities only on paper;
 - 16.4. developing electronic risk assessment tools related to emerging risks, guides to good practice, raising workers' awareness of hazards and risks at the workplace and the importance of complying with safety rules;
 - 16.5. promoting good practices among employers to ensure safety and health at work, incl. and by getting acquainted with accepted international and Bulgarian standards.
17. Knowledge of Safety and Health at Work is best acquired if it is integrated into the individual subjects studied, instead of being taught as a separate discipline. Practical training and real-life examples help children and young people to carry messages home. Different age groups - from primary school to vocational high schools, learn the main messages in different ways. Ideally, all teachers should receive Safety and Health at Work training in the course of their professional careers and incorporate risk education into their daily work. In this regard, according to ESC, it is necessary to update the curricula for secondary and higher education.

II. MAIN PRIORITY AREAS IN THE NEW NATIONAL PROGRAMME ON SAFETY AND HEALTH AT WORK 2022 - 2024

2. Priority Area 1: Managing the changes in the new world of work caused by green, digital and demographic transitions

- 2.1. In recent years, the digitalization of the economy has changed the nature of work by introducing telecommuting, platform work and mobile work based on information and communication technologies. Digitization has led to different effects on psychosocial risk factors (such as work stress, workload, work-life balance) and physical risk factors (such as repetitive tasks) in relation to work-related musculoskeletal disorders. ESC considers that action is needed to strengthen measures to reduce risk factors and promote health and well-being at work.
- 2.2. In connection with the development of digitalization, according to ESC, it is appropriate to assess and, if necessary, update the relevant regulations: Ordinance No. 7 of 23 September 1999 on the minimum requirements for healthy and safe working conditions at work and in use of work equipment, Ordinance No. 7 of 15 August 2005 on the minimum requirements for ensuring healthy and safe working

conditions when working with video displays and Ordinance No. RD-07-2 of 16 December 2009 on the terms and conditions for conducting of periodic training and instruction of employees on the rules for ensuring healthy and safe working conditions.

- 2.3. Green workplaces contribute to protecting the environment or restoring it to its original state. In order for green jobs to be sustainable, we need to make sure that they provide safe, healthy and decent working conditions. Given how fast the green economy is expected to grow, it is important to anticipate any new future occupational safety and health risks related to green jobs before they appear. ESC believes that the development of a methodology/tool for risk assessment and management in "green" workplaces will contribute to the prevention of potential risks to safety and health at work in this area. The term "green technology" refers to the application of existing knowledge to obtain certain products and practical objectives with minimal impact on the environment.
- 2.4. In this regard, action is needed, such as: (a) developing self-monitoring questionnaires to help employers identify potential threats to the safety and health of workers associated with these "green" technologies, as well as providing examples of preventive measures; (b) creation of an e-Guide for employers and workers in micro, small and medium enterprises related to "green" technologies (e.g. wastewater treatment, elimination of industrial emissions, recycling and waste management, self-sufficient buildings, energy from waste, generation energy from the waves, non-gaseous vehicles, use of solar energy, vertical gardens and farms, natural gas boilers); (c) training of workers in green working conditions so as to avoid risks to their health and safety; (d) supporting employers in implementing effective business models based on a green economy and healthy working conditions.
- 2.5. In recent years, older workers have become an increasing part of the workforce. As people work longer, Safety and Health at Work management becomes a priority in terms of age. Age-appropriate risk assessment means taking into account the age-related aspects of different age groups when assessing risks, which includes potential changes in functional capacity and health. There is a need to focus on ways to manage safe and healthy working conditions in the context of an aging workforce and to promote the exchange of information and good practice.
- 2.6. Policies to promote active aging and strengthen the link between the working generations are also a priority for the social partners at European and national level. In 2017, in the framework of the work programme of the social partners at European level (2015-2017), a Framework Agreement on Active Aging and Intergenerational Approach was signed, addressed to national organizations, members of the relevant European employers' associations and trade unions².

² EUROPEAN SOCIAL PARTNERS' AUTONOMOUS FRAMEWORK AGREEMENT ON ACTIVE AGEING AND AN INTER-GENERATIONAL APPROACH http://erc-online.eu/wp-content/uploads/2017/03/With-signatures_Framework-agreement-on-active-ageing.pdf

- 2.7. In this regard, ESC welcomes the joint actions taken by the social partners³ to implement the European Framework Agreement by:
- 2.7.1. proposing forms and initiatives, measures and policies to improve and adapt the working environment to the specific requirements of older workers, especially those with chronic illnesses, in order to promote longer working lives and the ability to work;
 - 2.7.2. development and implementation of practical tools, incl. manuals for managers and mentors (mentors) to adapt jobs and activities to the specific needs and capabilities of people with chronic diseases; description, ergonomics and design (reorganization) of the workplace in accordance with the needs of age and the promotion of longer working lives and ability to work; an age-appropriate electronic tool for safety and health risk assessment; electronic tool for assessing the factors in the work environment that cause occupational exhaustion (burnout);
 - 2.7.3. conducting trainings for managers, human resources specialists and employees' representatives, organizing receptions in enterprises for information and consulting, adoption of internal partnership plans and programs for adaptation of the working environment to the specific needs of different ages of employees;
- 2.8. ESC is of the opinion that the prevention of psychosocial risks requires a wide range of measures:
- 2.8.1. conducting a national Safety and Health at Work study focusing on the relationship between psychosocial risks and musculoskeletal disorders;
 - 2.8.2. developing a Mental Health Strategy, taking into account cross-sectoral policies;
 - 2.8.3. creation of an electronic guide for employers and workers in micro, small and medium-sized enterprises, with guidelines on workplace stress and psychosocial risks, practical examples of prevention return and coping with psychosocial risks;
 - 2.8.4. development of a tool for risk assessment of psychosocial risk factors;
 - 2.8.5. conducting information campaigns to raise awareness of employees and employers about psychosocial risks.

³ At national level, the commitment to the implementation of these agreements lies with the relevant employers 'and trade unions' members of the European ones that are parties to the agreements. For Bulgaria these are the Bulgarian Chamber of Commerce - Union of Bulgarian Business - member of BusinessEurope, Association of Industrial Capital in Bulgaria - member of CEEP, Union made in Bulgaria - member of SMEunited, Confederation of Independent Trade Unions in Bulgaria and Confederation of Labour Support - members of the ETUC.

3. Priority area 2: Improving the prevention of work-related illnesses and accidents

- 3.1. ESC considers that making every effort to reduce work-related deaths, in accordance with the Vision Zero approach to "Zero Mortality" compared to work-related deaths is possible only through: in-depth investigation of accidents and deaths in the workplace; identifying and analysing the causes of incidents; raising awareness of the risks associated with accidents at work and occupational diseases and strengthening the application of existing rules and guidelines.
- 3.2. Significant attention in the National Programme needs to be focused on hazardous chemicals and mixtures in the workplace, with special emphasis on carcinogens and mutagens. Hazardous chemicals are used in all economic activities. Micro, small and medium-sized enterprises need to be assisted in preparing a risk assessment.
 - 3.2.1. Development of a database of practical tools and guidelines containing practical measures for workplaces, such as guidelines for risk assessments and how to replace or eliminate the use of hazardous substances, as well as case studies;
 - 3.2.2. Development of a tool for risk assessment of chemicals in the work environment in risky enterprises;
 - 3.2.3. Training of employers and workers in the economic activity "Agriculture" in order to raise awareness of health and safety rules on farms, including the safe use of chemicals.
 - 3.2.4. Improving the national regulatory framework for medical surveillance of workers and early detection of diseases related to work and risks at work - construction, metallurgy, furniture, canning, etc.
- 3.3. HSWC national programme also needs to focus on risk prevention of chronic non-communicable diseases, which are among the leading causes of death and disability in the world. They form 59% of the total mortality structure and account for 45.9% of the global disease burden (according to *DALY's*). The group of chronic non-communicable diseases WHO experts include mainly diseases of the circulatory system, malignant neoplasms, chronic obstructive pulmonary disease (COPD), diabetes, mental illness, musculoskeletal diseases and trauma. According to a CITUB study funded by the Working Conditions Fund, conducted among 2,000 union members in three sectors in Bulgaria - healthcare, construction and light industry, for 60% of the working musculoskeletal injuries are the most common health problems related to work. According to the latest data from the National Social Security Institute (NSSI), 72% of all those who used rehabilitation under the NSSI programs had diseases of the musculoskeletal system. It is necessary to speed up the work on the revision of the normative acts in this area. Particular attention is paid to the first four groups of

diseases, given the high proportion of deaths (59%) or over 30 million people.

In this regard, ESC proposes the following activities and measures to be reflected in HSWC National Program:

- 3.3.1. raising the awareness of employers and workers by distributing manuals, handbooks, information materials on the specific needs and opportunities of people with chronic diabetes, cardiovascular disease and COPD, including and those developed by the social partners, as well as information on the diseases themselves;
- 3.3.2. funding training for managers (especially SMEs) and human resources professionals on opportunities for reorganization in the workplace, work organization and working hours to promote longer working lives and working ability;
- 3.3.3. informing and consulting through branch organizations, occupational medicine services, health and safety experts, trade unions, etc. on the obligations and regulatory requirements for employers regarding those working with chronic diabetes, cardiovascular diseases and COPD, as well as the possibilities for adaptation of their workplaces and dynamic health monitoring and expertise of working capacity;
- 3.3.4. measures to promote the "integration and return to the labour market" of people with chronic non-communicable diseases, with a view to continuing their employment, regardless of the possibility of receiving a disability pension;
- 3.3.5. measures to promote health, and in particular mental health, in the workplace, with a view to meeting the medical and health needs of workers;
- 3.3.6. funding of trainings aimed at improving the skills of self-government, education and support for career development and working life of people with chronic non-communicable diseases;
- 3.4. Doctors warn that stress is the "scourge of the decade" and should not just be avoided, but actively prevented and treated. The burnout condition can be described as the last stage of a process of unsuccessful attempts to deal with negative stressful situations. As a reason for the occurrence of burnout syndrome, individual researchers relatively unanimously point to personal factors, social environment, incl. factors in the workplace, and the interaction between the individual and the work environment, influenced by the respective organization / company.
- 3.5. According to ESC, the main strategies for reducing stress are:
 - 3.5.1. introduction of adequate content and organization of work to control psychosocial risk factors in the workplace;
 - 3.5.2. monitoring changes in the working environment and the health of workers;
 - 3.5.3. improving the information flow of the enterprise / organization, training and raising the qualification;

- 3.5.4. clear goals and strategies of occupational health services;
- 3.5.5. systematic approach and active participation of all services for health and safety at work in the company and those working in it. The systems approach includes planning, monitoring, risk assessment, strategy selection, evaluation and implementation of improvements.
- 3.6. The Covid-19 pandemic shows the importance of increasing preparedness for potential future health crises. In this regard, according to ESC, it is necessary:
 - 3.6.1. to prepare a national plan for future crises, which can be adapted by enterprises according to their activities, as well as to be periodically updated;
 - 3.6.2. to increase the preparedness of employers and workers for possible future health threats - development by the competent authorities of emergency procedures and guidelines for rapid deployment, implementation and monitoring of measures in potential future health crises in close cooperation with public health professionals.

4. General remarks

- 4.1. We propose that the period of the National Programme for Safety and Health at Work be 2022 - 2024. Due to the fact that 2021 is already expiring, it is not appropriate to envisage planned actions for this period. It is more correct to plan future activities in the National Programme for Safety and Health at Work.
- 4.2. The National Programme for Safety and Health at Work 2022 - 2024 needs to specify the activities of state bodies and institutions, organizations of employers, workers and employees, non-governmental organizations for the development of health and safety at work. The aim is to distribute responsibilities between institutions.
- 4.3. In order to carry out effective monitoring of the implementation of the activities included in the National Programme for Safety and Health at Work 2022 - 2024, it is necessary to determine indicators for implementation.

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