REPORT

for the period 1 June 2010 to 31 May 2015, made by the Government of Finland, in accordance with article 22 of the Constitution of the International Labour Organisation, on the measures taken to give effect to the provisions of the

Occupational Safety and Health Convention, 1981, No. 155
ratification of which was registered on 24 April 1985.

Observation, 2010

Article 4 of the Convention
Nothing new to report

Article 9
During the framework period of 2012-2015, the activities of the areas of responsibility with respect to occupational safety and health have been guided by the Strategy for social and health policy, Socially Sustainable Finland 2020, of the Ministry of Social Affairs and Health. The strategy has been specified in policies for the work environment and well-being at work, prepared on a tripartite basis. In these policies, one of the objectives for 2020 (when compared to 2010) is to reduce the perceived psychic strain by 20%.

During the framework period of 2012-2015, one criterion for allocation of the monitoring has been to avoid and reduce the harmful workload factors. The monitoring has been allocated to workplaces of those sectors, where there is harmful psychosocial strain, like for example threat of customer violence, harmful harassment and inappropriate treatment, and other psychosocial strain factors of work.

Number of labour inspections (inspection is carried out by visiting the workplace)

<table>
<thead>
<tr>
<th>Year</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of inspections</td>
<td>20,200</td>
<td>22,300</td>
<td>22,500</td>
<td>22,340</td>
</tr>
<tr>
<td>Inspected workplaces</td>
<td>14,162</td>
<td>15,983</td>
<td>18,729</td>
<td>20,700</td>
</tr>
</tbody>
</table>

The resources of the Occupational Safety and Health Administration have not been reduced, but the person-years of the areas of responsibility with respect to occupational safety and health have increased.

<table>
<thead>
<tr>
<th>Year</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person-years</td>
<td>418</td>
<td>411</td>
<td>421</td>
<td>451</td>
</tr>
</tbody>
</table>

Articles 13 and 19(f)
The provisions on violence are primarily found from the Occupational Safety Act. In addition, there are provisions on violence in the Section 9 of the Young Workers’ Act (998/1993), Section 12 of the Occupational Health Care Act (2383/2001), and in the decrees issued under these acts, as well as in the Section 2 of the Government Decree on Medical Examinations in Work that Presents a Special Risk of Illness (1485/2001). The Occupational Safety and Health Administration has published guidelines for the monitoring of physical violence and its threat in 2010.
Articles 14 and 19(d)

It is often agreed in agreements on organising occupational health care and in action plans that sudden illnesses can also be treated by general practitioners, if it is not possible to get an appointment with a specialised physician. With these arrangements, it is possible to direct the work contribution of physicians specialised in occupational health care in work tasks that require expertise in occupational health care. However, the general practitioners must always direct the patient to a specialised physician in cases where the question is about work-related matters or when the sick leave is about to be prolonged. This has been instructed in guidelines called The good nursing practice in occupational health care, prepared on a tripartite basis and published in 2010 by the Ministry of Social Affairs and Health, and in book called Good occupational health practice, published in 2014, which explains the Government Decree 708/2013.

Article 2 of the Protocol

Nothing new to report

Article 3(c)

Occupational safety and health legislation does not include regulations on obligations and timeframes for maintaining records on occupational accidents and occupational diseases. In accordance with Section 10 of the Occupational Safety and Health Act, however, employers are obligated to monitor the occurrence of occupational accidents, for which purpose they must maintain the records on occupational accidents for a suitable period of time.

In Finland, when there is an occupational accident, the company notifies their own insurance company about the case. The notification defines the basic information concerning the accident, such as the date, time and place of accident, the estimated length of the work incapacity and whether the occupational accident has happened on the workplace or while commuting. In addition, the notification describes the nature of the injury and how the accident happened. The notification describes the work and the task the injured person was doing, what lead to the injury, how the injury happened and what caused the injury.

The information is registered in the company's own insurance company and, if they so wish, the company can receive information on all the accidents happened to them. In addition, all the accident insurance companies send the information to the Federation of Accident Insurance Institutions, which compiles information on all the national cases concerning wage earners. That way all the detailed information on the accident are always available in Finland.

Part V

Nothing new to report

I-III.

Nothing new to report

IV-V.

The Federation of Accident Insurance Institutions (TVL) promotes occupational safety by supporting the work on occupational safety of insurance institutions underwriting insurances according to provisions in the Employment Accidents Insurance Act (608/1948) and the work of other stakeholder groups of the TVL. TVL supports this work by producing up-to-date, reliable and useful statistics and research information on the occupational accidents and illnesses, as well as fatal workplace accidents that have been reported to the insurance institutions. With this activity, we
also, for our part, respond to the requirements to review problems related to occupational safety and health in the Article 7 of the Convention no. 155.

A strategy work on occupational safety activities was carried out in 2010-2011 at TVL, the purpose of which was at the same time to define the status of TVL's occupational safety activities in relation to other occupational safety actors and that way to revise the focus of the occupational safety activities of TVL. With this activity, we also, for our part, respond to the requirements in the Article 6 of the Convention no. 155 to review problems related to occupational safety and health.

In Finland, the policies and legislation relating to occupational health and safety are prepared following a tripartite principle, which means that employer and employee organisations' representation has been ensured. Labour market organisations are represented also in the TVL's decisive bodies and in the committees relating to occupational safety.

In Finland, the statutory accident insurance coverage is provided by insurance companies, State Treasury and Farmers’ Social Insurance Institution (Mela), who support their customers’, i.e. the insured companies' occupational safety activities by offering them consultation services, training and guide material. Also TVL produces guides and other training material related to occupational safety. TVL also organises research on the fatal workplace accidents together with the insurance institutions and labour market organisations, and regularly publishes research reports to be utilised by stakeholder groups in activities and trainings promoting occupational safety.

Attached here are also Occupational accidents and illnesses 2014, annual statistics publication, and Occupational accidents and illnesses 2014 press release, which describe the development of the number and frequency of occupational accidents and illnesses between 2005-2014. In addition to statistics, these publications present an in-depth analysis on the reasons and phenomena of the perceived trends. We ask you to take the attached development analyses that partly respond to the questions concerning Convention 155 into consideration.

Statistics on frequencies of accidents at work are available under the following link (in Finnish only) [http://www.tvl.fi/fi/Tilastot-Tilastojulkaisut/Tilastojulkaisu/](http://www.tvl.fi/fi/Tilastot-Tilastojulkaisut/Tilastojulkaisu/)

According to the preliminary estimation of the Federation of Accident Insurance Institutions (TVL), in 2014 insurance institutions paid compensation for a total of around 117,000 occupational accidents that happened to wage earners. This number is circa 5% smaller than that of the previous year. A little under 100,000 of the compensated accidents were workplace accidents, which is circa 2% less than in the year 2013. In addition, there were circa 6,500 occupational accidents compensated for entrepreneurs that had a voluntary accident insurance.

The number of fatal workplace accidents remained the same
According to the preliminary estimation, 20 wage earners died in workplace accidents last year. According to current information, 20 were killed in workplace accidents and 12 in commuting accidents in 2013.

There will be no preliminary estimation this year on the number of people who died in commuting accidents. The information on the number of wage earners' fatal commuting accidents will be published next autumn, when the final accident numbers for the year 2014 are published.

Accident frequencies decreased
The combined total accident frequency of all the industry sectors was around 29.3 workplace accidents per a million work hours. The frequency number decreased slightly from the year 2013, when the frequency was 29.6.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Accident frequency in 2014 (in 2013)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Industry</td>
<td>35 (33)</td>
</tr>
<tr>
<td>Construction</td>
<td>63 (63)</td>
</tr>
<tr>
<td>Wholesale and retail trade</td>
<td>30 (29)</td>
</tr>
<tr>
<td>Transportation and storage</td>
<td>43 (46)</td>
</tr>
<tr>
<td>Administrative and support services</td>
<td>52 (52)</td>
</tr>
<tr>
<td>Municipal sector</td>
<td>22 (24)</td>
</tr>
</tbody>
</table>

Aside from trade and industry, the accident frequencies have either decreased or stayed on the same level with the previous year. For years, there has been a good downward frequency trend especially in the field of construction. The now perceived frequency increase must be treated with caution in the fields of industry, because during the recession, there are significant uncertainty factors related to the hour estimate used as a basis for the frequency calculation. Like in construction, the downward frequency trend in industry has lasted already for years, save for this exception.

The Zero Accident Forum, coordinated by the Finnish Institute of Occupational Health, is a successful example of measures targeted at reducing occupational accidents. Nowadays 327 voluntary organisations are members of the Zero Accident Forum. In these companies approximately 300 000 employees worked, which equals to 15% of the Finnish working population.

The development of an occupational disease from the beginning of exposure to observed illness varies significantly by disease category. Approximately 4,000 to 6,000 cases of occupational diseases and suspected occupational diseases are observed each year. One of the most commonly known or suspected occupational diseases is noise trauma (about 24% of diseases). The occurrence of occupational diseases in proportion to the number of workers is largest in the preparation of vehicles. Between 2010 and 2013, the number of occupational diseases for which compensation is paid has still decreased. The number of occupational disease cases compensated for in 2012 totalled 4,404. (Oksa, P., Palo, L., Saalo, A., Jolanki, R., Mäkinen, I. & Virtanen, S.: Ammattitaudit ja ammattitautiepäilyt 2012. Työterveyslaitos, Helsinki, 2014). In the year 2013 the number of cases was 4602.

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A copy of this report has been sent to the following labour market organisations

1. The Confederation of Finnish Industries (EK)
2. The Central Organization of Finnish Trade Unions (SAK)
3. The Finnish Confederation of Professionals (STTK)
4. The Confederation of Unions for Professional and Managerial Staff in Finland (AKAVA)
5. The Commission for Local Authority Employers (KT)
6. The State Employer’s Office (VTML)
7. The Federation of Finnish enterprises

Statements of the labour market organisations:
Central Organisation of Finnish Trade Unions
Refer to earlier statements of the central organisations of trade unions.

Akava
Refers to its statement in 2010 on the Convention and states that the psychosocial strain factors and the employees' mental health must be in an equal position when occupational safety, health and rehabilitation issues are discussed. Work related violence and threat of violence are not prevented well enough and the post-incident support of violent situations has not been properly taken care of. The protection of employees from the harmful effects of biological factors in work environment is not on an adequate level, either.

Inspection system
The Article 9 of the Convention requires an adequate and appropriate system of inspection. Akava repeats its concern from the year 2010 on the implementation of the inspection system and on the position of the occupational safety and health authorities as part of the state regional administration. It would seem that the abolition of occupational safety and health inspectorates and merging the occupational safety and health authority with the state regional administration has weakened the accessibility of the occupational safety and health authority. It is more difficult for the private customers to find the occupational safety and health authority from the state regional administration than from independent inspectorates.

Monitoring psychosocial strain
The occupational health and safety authority has adopted guidelines for monitoring psychosocial strain, which aim to improve the methods of supervision to address the psychosocial strain of the work. However, Akava still pays attention to the need to secure the resourcing and supervisory competence of psychosocial strain factor monitoring.

Biological factors:
The Convention also covers the biological factors of the work environment. Akava states that the microbes related to buildings' moisture damage (mould, mildew and bacteria), their metabolites (toxins) and the compounds that are released from the buildings due to moisture danger the health of the employees.

Since the medical evidence on the causal connection between moisture damage and a person's symptoms is lacking, only few cases can be diagnosed as occupational illnesses. Many of the employees that have symptoms due to moisture damage microbes are left without proper protection and are marginalised without social security, if their symptoms are manifested only at their work place that is damaged by moisture. For example, 9.4% of the teachers at day cares and education institutes have been absent from their work during the last 12 months due to indoor air problems (The Trade Union of Education OAJ's working conditions barometer 2014). Despite attempts, the position of these employees has not been improved.

There are many buildings in Finland that are harmful to health, i.e. that are significantly damaged by moisture and mould, especially in the public sector. According to the report 1/2012 by the Parliamentary Audit Committee, 12-26% of the floor plan of the buildings in the caring and education industries are significantly damaged by moisture and mould (Moisture and mould problems in buildings, publication of the Parliamentary Audit Committee 2/2012). The Audit Committee's report required measures from the Finnish Government to rectify this situation and to improve the legal protection of the patients. The measures have not been conducted especially as to fixing the buildings, determining the medical causality and improving the legal protection of the patients.
Violence and threat of violence at work

As to the Articles 13 and 19f, Akava points out that violent situations and the threat of violence have increased steadily in Finnish working life, and that in this changed social situation it has not been possible to react well enough to daily violence, to threat of violence and the harmful strain it causes, or to armed and other attacks. Neither has it been possible to anticipate these situations in the use of systems, in improving the flow of information between authorities or in developing the work environments.

Akava states that violence and its threat are experienced especially in the public sector work duties, like work duties in health care, social services and education in the municipal sector (Municipal occupational well-being, Keva's research 1/2014). Because of violent situations, a serious threat of losing one's life or health is experienced in these same work duties. There was a school shooting in a Finnish education institute in 2007 and 2008, and after these there have been armed attacks in education institutes every year. Pupils/students and/or staff of the education institute have been harmed in the attacks. Annually there are around 200 school threats, and also universities have been targeted.

Violence is daily also in work duties, which means it is a continuous accident risk and a strain factor at work. Here Akava refers to its statement from 2010 and repeats its member union's, the Union of Professional Social Workers Talentia's views on the inadequacy of the national legislation and guidelines. Already in 2010, Talentia reported on its members' inquiries about whether workers need to go to clients' homes on house calls alone, or face clients, if they fear the clients in question, knowing them to be violent, or have even had their lives threatened by the client. The it was reported that in such cases, the workers' supervisors have ordered them to press ahead and handle their duties. If, after personally evaluating duties as posing a major threat, workers refuse to perform such duties, the situation may be interpreted as refusal to work without a valid reason. In addition, Talentia reported in 2015 that social services of a large Finnish city had denied working in pairs while going on house calls as a savings measure. Each worker thus has to go on house calls alone. Akava sees that this is not in agreement with the Article 13 of the Convention.

Akava also points out that in the fields of education and day care, violence and the its threat are manifested not only as school attacks, but also as inappropriate treatment, threats and direct violence by the children and pupils, as well as by their guardians. One in every ten teachers had experienced violence or its threat during the last year, and 7% had been sick and absent from their work because of violence (The Trade Union of Education OAJ's working conditions barometer, published on 23.4.2014). Every fourth comprehensive school teacher had experienced harassment and bullying by the pupils, and in vocational schools and polytechnics the corresponding percentages were 12 and 15%, respectively. Every fifth day care and comprehensive school teacher had experienced harassment by the guardians. Controlling violence and its threat have not been successful in the changed situations in these workplaces. Akava states that the requirements of the Convention on the protection of employees' health are not met in this respect, either.

Also employees in the field of health care have to face violence and its threat in their work by the patients or their families or next of kin.

In Akava’s view, it would be important to clarify the Occupational Safety Act for the purposes of preventing work-related violence more effectively and improving post-incident support in cases of work-related violence and threats of violence. There have been several negotiations on the matter arranged on a tripartite basis over the past few years, but unfortunately the matter has not progressed.
Cooperation between management and employees

The Article 20 of the Convention concerns the cooperation between management and employees in an organisation. Akava again emphasises that the requirement of Article 20 is not implemented, because all the personnel groups do not have the right to elect their own representatives to the cooperation on occupational safety and health in the workplace. The same applies to cooperation on occupational safety and health of the occupational health care (Occupational Health Care Act (1383/2001) Section 8), where the Act on Occupational Safety and Health Enforcement and Cooperation on Occupational Safety and Health at Workplaces (44/2006) is applied to both parties to cooperation.

The higher-ranking salaried employees do not have a statutory right to elect their own an occupational safety and health representatives to cooperation on occupational safety and health on workplaces. Akava considers that as a result of this, the strain and risk factors of the work of higher-ranking salaried employers are not sufficiently discussed in the cooperation on occupational safety and health on workplaces.