

Training Session on Safety and Health: 2018

“Vision Zero in the Construction Sector”

Century Club, Bangalore

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A seminar on safety & health issues for construction workers was organized by Social Security Association of India, Bangalore Chapter, in collaboration with National Centre for Labour (NCL) and German Social Accident Insurance (DGUV) with support from International Social Security Association (ISSA). Distinguished trade union representatives from all the trade unions, working amongst both the organized and unorganized sector, like, INTUC, AITUC, HMS , CITU and NCL, distinguished social security administrators, State Government representatives, economists and academicians were present on the occasion. As many as 80 participants were participated in the seminar.

2. Prof. K B Akhilesh, President, Bangalore Chapter presided over the inaugural session.

3. The seminar started with the welcome address by Shri Kennedy Ramand, Honorary Secretary, Karnataka Chapter. While welcoming the distinguished gathering, he briefly introduced the subject matter of the day’s seminar on “Vision Zero in the Construction Sector”. He informed the gathering that the present seminar was being organized in association with DGUV and under the guidelines of Prof. h.c. Notel, President of International Social Security Association, Construction Section. The objective of the seminar, he stated, was to provide insight into the best practices in

construction sector prevailing in the developed countries, especially in Germany and to emulate the attitude of providing better equipment and adequate knowledge on safety and health management techniques to ensure workplace free of accidents to the workers.

4. Prof. K B Akhilesh in his Presidential speech paid his personal regards to the German experts and to Prof. h.c. Notel, in particular, for organizing the seminar for creating a vision on safety measures at workplaces. He also gave an overview of the activities of construction industry in our country and highlighted importance of the sector in creating national income. He said that although this industry generated significant percentage of GDP, sadly 85% of the workers engaged in this industry belonged to the unorganized sector. He referred to the preponderance of migrant labour in this sector and their vulnerability to many diseases, like, malaria, respiratory related diseases arising out of the living conditions and addiction to tobacco and alcohol. He also highlighted the incidences of accidents arising out of electric short circuits because of the negligence of the builders in adhering the safety standards and taking due protection in this regard.

5. Shri B N Som, Secretary General, Social Security Association of India, in his introductory remarks stated that in the construction industry there was always a conflict of interest in providing adequate safety to the workers by the builders who were driven more by profit making motives than the objective of welfare of workers. As a result, the builders neglected safety and health aspects of the workers for the sake of maximizing profitability. Though there was no dearth of welfare schemes for health care, like, RSBY and Arogya Shree in the States of Karnataka, Andhra, Telengana and Maharastra, full advantage of these beneficial schemes was not percolating down to

the workers. He, therefore, was of the view that there was need for organizing awareness programmes on safety and health in the larger interest of the society.

6. Shri Manjunath - Director, Industrial Safety and Health, Government of Karnataka, spoke of the safety measures that Karnataka Government were taking for the protection of the workers. He believed that training programme of the type which was being organized would go a long way in strengthening the safety and health measures of the Government.

7. The seminar was divided into three technical sessions – for the first one the resource person was Ms. Eva-Marie Höffer, Head, International Social Law Division, German Social Accident Insurance (DGUV), Germany, on accident, rehabilitation and occupational health. For the second session, faculty was, Prof. h.c. Noetel, President, ISSA Construction. He spoke on accident statistics world over and electrical safety issues in construction site. The third session speaker was Shri B. K. Sahoo, India Head, Indo German Focal Point, to speak on prevention of accidents and social security in India. These three technical sessions were followed by a panel discussion of experts on Indian experience in implementation of safety and health standards for at construction sites.

8. In technical session I, Ms. Eva-Marie Hoffer gave a presentation containing an overview on the statutory accident insurance schemes in Germany. In her presentation, she compared the core issues faced by the construction workers in India through her research data vis a vis their counterparts in Germany. She explained about the system of safety and health that were in existence in Germany. They were aiming at attaining “Vision Zero in the Construction Sector”, with social security and OSH that addressed mainly the issues on safety, health and social protection of

workers. She stated that the core areas that they looked for social security system were as follows: -

- a. Pension,
- b. Health care,
- c. Unemployment and work accident.

9. She stated that in Germany, they were following Bismark-ian system i.e. on the theory of solidarity of the social group with compulsory membership, financed through contributions from the members and the employers. The implementation organization was working on non-profit basis with triple objectives of training, rehabilitation and compensation for the worker. This accident insurance scheme was mandatory in nature. The scheme would also cover employee's children and day care centers for children. The financing of the scheme was based on the following parameters:-

- Contributions paid by employers only
- Average rate: 1.3 % of a company's payroll
- Risks covered under the scheme include: -
 - a. Occupational accidents
 - b. Commuting accidents and occupational diseases.

10. Another aspect of the scheme was that each worker would be given vocational training when he was on the job, depending on the skill set of each worker to make him specialised in a job of his choosing. There would be a risk management scheme which would look into all aspect of workplace safety. When an accident would happen, the worker would be compensated through insurance and would be rehabilitated to resume the work with plenty of counselling till he would attain

requisite fitness to work. In the meantime, he would be compensated through the insurance for his absenteeism.

11. Another aspect of the German system related to rehabilitation process of a worker. She explained that the rehabilitation was an important aspect of the safety scheme for the worker. So, if a worker would sustain injury on job, his rehabilitation would be done in three stages.

- Medical
- Occupational
- Social

Rehabilitation would aim at making the worker able to participate in social life through

- Providing specially equipped cars
- Conversion of homes with wider doors, sanitary facilities, lifts, or ramps as required.
- Counseling- educational and psychosocial assistance
- Housekeeping support
- Rehabilitation sports
- More than 90 % could return to work without medical rehabilitation (minor accidents)
- More than 90 % of the persons who got medical rehabilitation benefits could return to work without vocational rehabilitation
- Nearly 90% of the persons, who would get extended/special vocational rehabilitation vocational training, qualifications could be reintegrated to work .

12. Ms. Eva-Marie Höffer, while explaining the measures obtaining in her country on occupational health dilated on the importance of occupational health in the construction sector. In her presentation. she remarked that construction was the most dangerous occupation incurring more fatalities than any other sector. She expressed the equation of ILO + WHO: occupational health which dealt with health safety with strong focus on primary prevention of hazards. The three objectives which needed focus in this regard were: -

- i. the maintenance and promotion of workers' health and working capacity;
- ii. the improvement of working environment and work.
- iii. development of work organization and working cultures in a direction which supports health and safety at work.”

13. She concluded by saying that the concept of 'Vision Zero' was fast gaining international acceptance and was expected to leverage the efforts of the Government of India to raise the occupational safety and health standards in the country so as to improve the occupational situation.

14. During the interactive sessions after her talk, Smt. Karthiyini Chamraj, Joint Secretary, Karnataka Chapter, sought clarification on the procedure for rehabilitation of a worker and his claim settlements.

15. Ms. Eva-Marie Höffer, explained that their system to look after an employee after the accident at the workplace and DGUV would act as a middle man between the employer and the employee to resolve any issue that might crop up regarding health safety of the worker.

16. Responding to another question as to how training played a role to empower the worker in his job, she clarified that training orientation was compulsory in German and that rehabilitation management played a very important role in that regard.

17. Prof. H.C. Karl-Heinz Noetel, President, while speaking on the topic 'Accident Statistics Worldwide' stated that every year, every 14 seconds, someone was dieing at workplace. Annually 2.4 trillion US-Dollar loss was being sustained worldwide. Fatal injuries due to fall constituted 20% of all fatal injuries. Annually, 0.25 trillion US-Dollar loss ewas being sustained worldwide due to accidents at workplace and 160 million occupational diseases were being reported worldwide every year. More than 2.3 million deaths caused by accidents at workplace on work-related health conditions.

18 Prof. Noetel emphasised on the impotance of electrical safety at construction sites. He talked of the fatalities due to workplace accidents, and accidents due to high power of electricity, about the influence of the high voltsge current power on human being and of factors influencing severity of accidents involving electricity- the risk on direct contact, indirect contact, protective measures against contact with overhead lines, hazard areas and so on. He also explained about protection and on insulation devices as important aspects to guard against the accidents.

19. Prof H C Karl-Heinz Noetel also spoke on –“Prevention of falling from heights“. He highlited the fact like fatal injuries due to fall ~20 % of all fatal injuries. Annually 0.25 trillion US-Dollar (0.8%) economic loss was happening worldwide due to such accidents.. In his presentation he talked of fall from the roof, fall during window cleaning,fatal fall between scaffold and building, fatal fall due to too low railings (0,60 m), fatal fall due to absence of side-protection and fall while installing of an elevator (8 m fall). He also spoke of protection devices on construction sites as a risk reduction technique for different roof and, edge protection devices, side protection, side railing. Use of work position belt to reduce the risk of injuries and falls.

20. Shri B.K. Sahu, in his presentation, highlighted on the skill development of workers and emphasized on the following facts about the technical proficiency of the construction workers.

- that only 2.3% of the workforce in India had formal skill training compared to 68% in the UK, 75% in Germany, 52% in US, 80% in Japan and 96% South Korea.
- That 62% of India's population was in the working age group (15-59 years), and more than 54% of the total population was below 25 years of age.
- To reap this demographic dividend which was expected to last for next 25 years, India would need to equip its workforce with employable skills and knowledge so that they could contribute substantively to the economic growth of the country.

21. He was of the view that social security, as a measure, could reduce the burden of the country-

- By providing minimum social security in the form of health care and cash benefit, the worker would continue in the same job and in the process the owner/ the management would be inclined to invest in developing skill of such workers over a period of time e.g. if he was an electrician, by sending him to further training to Industrial Training Institutes (ITI) and likewise many other trades available in the country.

22. He was of the view that skill development could be better achieved through introduction of social security in the society. He presented the following tools to take a Vision Zero at the work place on the following principles;= -

- ❖ Accept Leadership to demonstrate commitment
- ❖ Bring Risk Assessment to identify hazards.
- ❖ Create Safe and Healthy equipments
- ❖ Define Targets for developing effective programs
- ❖ Ensure a Safe and healthy system for smooth adoption
- ❖ Facilitate skill development for improved competence
- ❖ Guide to achieve team work – “One For All” & “All For One”

23. According to him prescription for safe and secure Skill India would consist of the following: -

- In any organization, Safety must start with the Top Management and therefore a “Boardroom Topic”. Health & Safety should be made an integral part of business.
- Safety was a mindset
- A holistic safety training program was the need of the hour and must be an integral part of the Skill Development initiative launched by the present Government.
- For “Make in India” & “Skill Development” initiatives to succeed, health & safety would have to be accorded top priority.

24. He listed the challenge to achieve the aforesaid objective as follows: -

C - Country with Vast numbers

H - Health care infrastructure limited

A - Ageing population

L - Lack of Uniformity in Schemes

L - Large Scale misuse

E – Engaging who can afford to pay

N – Networking of schemes and agencies like Asha, Agwanwadi & Registered Agencies

G - Guiding use of information Technology

E - Educating People

S - Solution based Grievance Mechanism

CONCLUDED the session with the following formulation-

A+T+T+I+T+U+D+E 1+20+20+9+20+21+4+5 = 100% “AND It is OUR ATTITUDE towards Life and Work that makes OUR Life 100% !!!” ,he concluded.

25. A panel discussion comprising of Shri Vijendra, Additional Director, Government of Karnataka, Shri NP Samy, National Secretary, National Council of Labour, Dr. M.R. Narayana,formerly Prof, Institute of Social and Economic Change, Govt. of India, to talk on Indian experience on safety and health. The session was chaired by Dr. Mahendra Raju, National Coordinator Social Security Association of India.

26. Dr Mahendra Raju initiating the panel discussion requested Dr M R Narayana for his presentation. Dr Narayanan highlighted five key lessons to take home from the German experience.

- a. Government- to provide the basic necessities of health, safety and employment as main social security system for the workers.
- b. Employee-employer relationship in providing safety at workplace, health protection for employees, improved working conditions, training, providing health schemes should be made integral part of corporate policy prescription. .
- c. Standardization on health safety coverage: Health care system was suffering from lack of standardization due to reasons like no pricing standardization, treatment guidelines, ICD codes etc.
- d. Lack of equality and transparency in the whole system
- e. Regulatory aspect- Health being a concurrent subject there is lack of uniformity in health care policy causing discrimination and often was treated as a political gambit resulting in uneven flow of benefits. Government had separated the welfare schemes and accident schemes which should be relooked.

27. Shri Vijendra, Additional Director, stated that health and safety of the workers in the State of Karnataka issues were considered carefully according to the statutory provisions in new construction projects involving Rs.25 crore and above. He, however, regretted that despite the provisions of Factories Act, and other Acts concerning occupational safety of the workers, the implementation process was not adequate enough, calling for sprucing up the system .He suggested that the system should

provide for clear cut policy regarding fixing responsibility for not curing any lacuna in compliance with the safety regulation.

28 In the concluding session, Shri B N Som summed up the salient features of the presentation made by the experts which led to the logical conclusion that there would be lot of training sessions and workshops to be conducted to create awareness about setting up safety measures for the benefit of the construction workers. It called for co-ordination of all the stake holders. He also called for proper budgeting for compliance with the safety regulations and for care and timely treatment of occupational diseases as brought out in the presentation by the Germany Experts for proper rehabilitation and compensation of the workers.

Conference ended with a vote of thanks to the Chair.
