

*Introduction to the 2006 – 2010 Work Plan*

*of the*

*WHO Global Network of Collaborating  
Centres in Occupational Health*



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Co-Coordinator, Network

# WHO Global Occupational Health Network

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- A partnership of WHO and other bodies working together to achieve the "*WHO Global Strategy on Occupational Health for All*" \*
- Partners:
  - WHO HQ and WHO Regions
  - 64 CCs worldwide
  - ILO
  - Nongovernmental organizations (ICOH, IOHA, IEA)

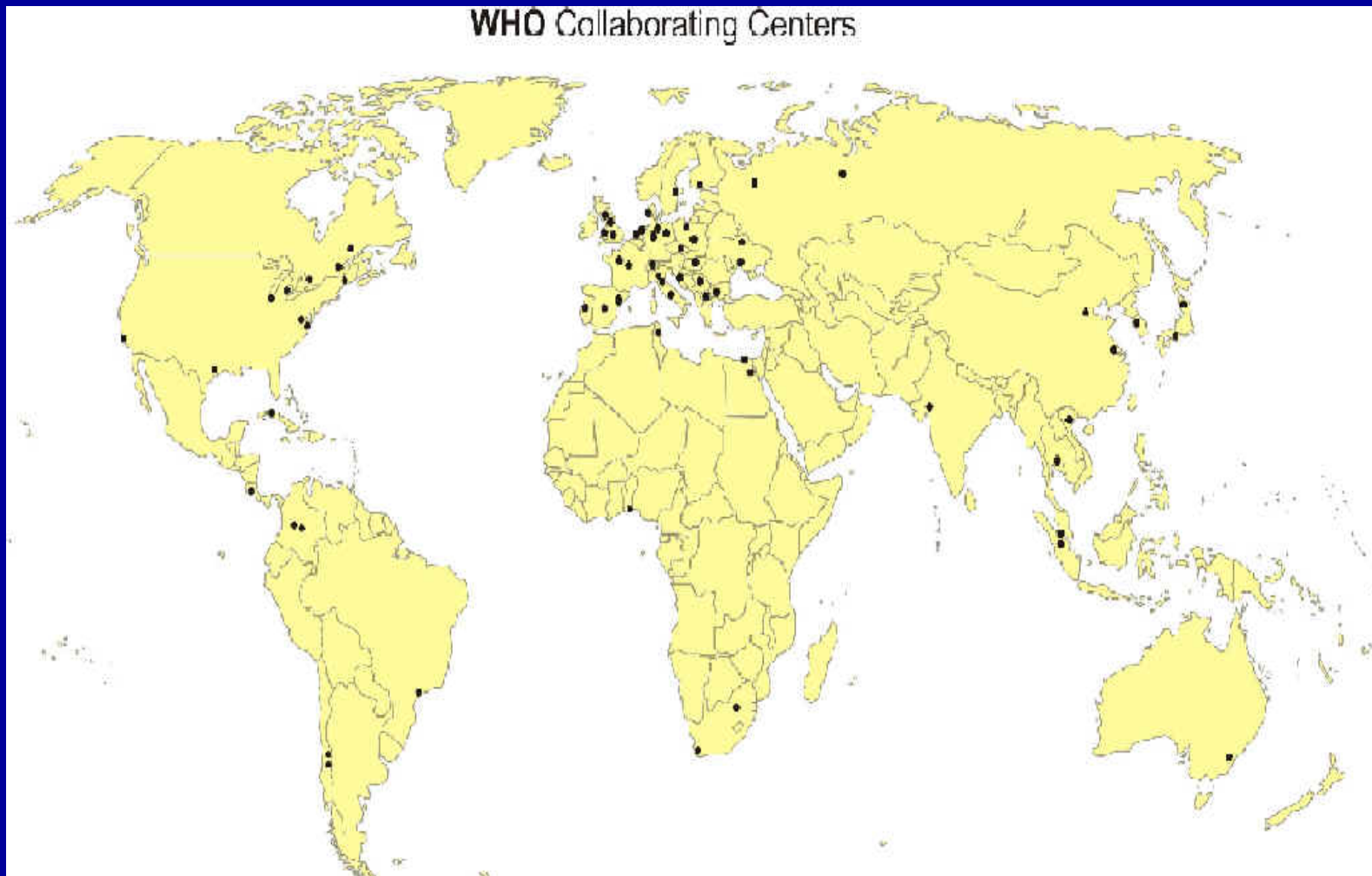


\* WHA Resolution WHA49.12, 1996

# WHO Collaborating Centers in Occupational Health

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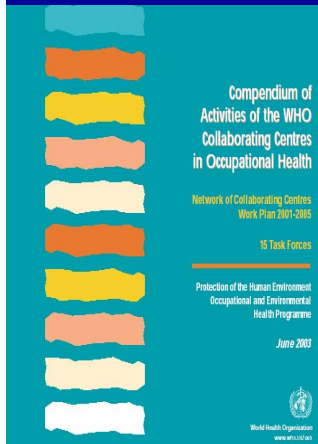
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# WHO Global Occupational Health Network

- **Strategy: 2001-2005 WHO CC Global Work Plan**

- 15 priority areas
- 350 funded projects
- All 64 CCs participating
- [http://www.who.int/occupational\\_health](http://www.who.int/occupational_health)



- **Network meetings every 2 to 3 years**
  - 2003 Iguassu Falls, Brazil (with ICOH)
  - 2006 Milan (with ICOH)



# WHO Global Occupational Health Program

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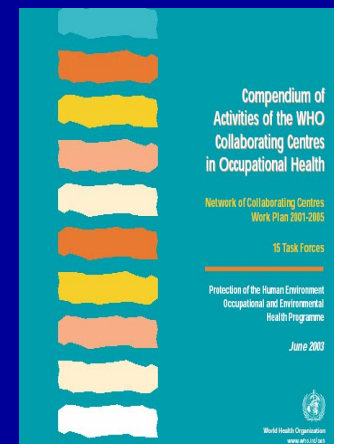
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- Goal: Occupational Health for All
  - Focus is on assisting developing nations
- Emphasis: Coordinated WHO CC Global Work Plan
- Emphasis: Practical solutions in workplaces
- Emphasis: Free products with wide dissemination



## 2001 – 2005 Global Work Plan 15 Task Forces

- Guidelines
- Intensive partnership in Africa
- Child labour
- Elimination of silicosis
- Health promotion
- Psychosocial factors
- Small enterprises and informal sector
- Musculoskeletal
- Preventive technology
- Training
- Internet resources
- National profiles and indicators
- Economic evaluation
- Global burden of disease



# Examples of Successes of Task Forces





## WHO/ILO Joint Effort on OSH in Africa and TF 2 Intensive Partnership in Africa

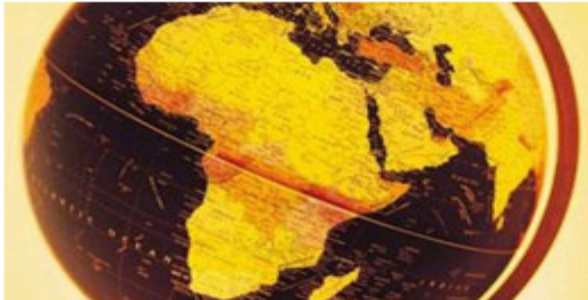
AJE Home Page - Microsoft Internet Explorer

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Address <http://www.sheafrafrica.info/> Go Links

### WHO/ ILO Joint Effort on OHS in Africa



**Language :**

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WHO	Joint Effort	ILO	ASOSH
			

Internet

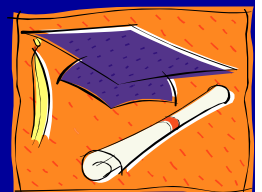
## TF 11 Training of Occupational Health Personnel

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### Diploma and Masters in Public Health: Occupational Hygiene

- University of the Witwatersand and National Institute of Occupational Health, South Africa
- Teaching assistance from several Collaborating Centers
- **Year 3 students are required to complete a workplace research project**
  - **IOHA's** American Industrial Hygiene Association linked each student to IH in the USA as mentor for protocol and research.





# TF 11 Training of Occupational Health Personnel

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- **Dust Course and CD ROM**
- Audience is teachers and users of dust control
- Five day course using *video enhancement* of WHO Prevention and Control of Exposures (PACE) Document
- Pilot tested in Cape Town and Johannesburg
- **National Institute of Working Life, Sweden**
  - Finnish Institute of Occupational Health
  - University of Cape Town, SA
  - National Institute of Occupational Health, SA



# TF 12 Internet Resources and Networks Task Force

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# TF 10 Preventive Technology Task Force International Chemical Control Toolkit

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- A scientifically based user friendly system for small and medium enterprises to focus on **control of workplace chemical exposures**.
  - Adopted by International Program on Chemical Safety (ILO, WHO, UNEP)
- **Why is it valuable?**
- Occupational risk assessment and management tool for use by companies without on-site technical experts and expensive exposure measurements.
- **Implementation in developing nations**
  - WHO/IPCS Meeting in Utrecht June 2004
  - Pilot studies in Brazil, India, South Africa and Benin



# Example COSHH Essentials Control Guidance Sheet

# 3

Control approach 3



This guidance sheet is aimed at employers to help them comply with the requirements of the Control of Substances Hazardous to Health Regulations 1999 (COSHH) by controlling exposure to chemicals and protecting workers' health.

The sheet is part of the HSE guidance pack *COSHH essentials: easy steps to control chemicals*. It can be used where the guide recommends control approach 3 - containment - as the suitable approach for your chemical(s) and task(s).

This sheet provides good practice advice on sack emptying, and can be applied to tasks involving medium quantities of solids. It describes the key points you need to follow to reduce exposure to an adequate level.

It is important that all the points are followed.

Some chemicals can also be flammable or corrosive. Where they are, your controls must be suitable for those hazards too. Look at the safety data sheet for more information.

For certain processes your local authority or the Environment Agency limits detection equipment before you get into

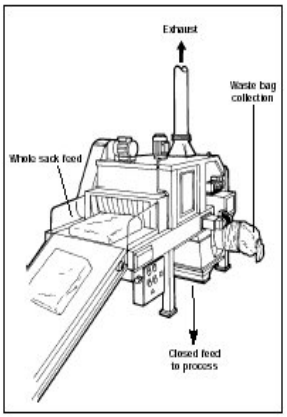
Control guidance sheet

## Sack emptying

304

Containment

- Access**
- ✓ Control staff entry to the work area.
  - ✓ The work area and equipment should be clearly labelled.
- Design and equipment**
- ✓ Provide arrangements to strip and vacuum or wet clean the conveyor belt.
  - ✓ Enclose the sifter as much as possible - see diagram.
  - ✓ Ensure an inward airflow of 1.0 metre per second at any opening into the enclosure.
  - ✓ Keep all openings as small as possible - while allowing enough room for safe working. Use see-through panels and plastic strips to reduce the open area.
  - ✓ Consider additional ventilation at the bag disposal point.
  - ✓ Provide good lighting.
  - ✓ Select lighting equipment suitable for the nature of the substances and processes, eg dust tight or flameproof, if needed.
  - ✓ Design the system to allow easy maintenance.
  - ✓ Where operational factors permit, keep the process equipment under negative pressure to prevent leakage.
  - ✓ Discharge extracted air to a safe place away from doors, windows and air inlets.
- Maintenance**
- ✓ Ensure all equipment used in the task is maintained as advised by the supplier/installer, in effective and efficient working order and good repair.
  - ✓ Adopt a 'permit to work' system for maintenance work.
  - ✓ Follow any special procedures that are needed before the system is opened or entered, eg purging and washing.



- Control guidance sheet 304
- Examination and testing (if a ventilation system is provided)**
- ✓ Get information from the supplier on all parameters needed to safely operate the system.
  - ✓ Visually check equipment at least once a week for signs of damage.
  - ✓ Ensure any extraction equipment is thoroughly examined and tested against its performance standard. This is generally at least every 14 months (see HSE publication HSG54).
  - ✓ Keep records of all examinations and tests for at least five years.

- Cleaning and housekeeping**
- ✓ Thoroughly clean work equipment and the work area daily. Clean other equipment and the workroom regularly - once a week is recommended.
  - ✓ Store packages/containers in a safe place (see CGS 101).
  - ✓ Dispose of empty packages/containers safely.
  - ✓ Put lids on containers immediately after use.
  - ✓ Deal with spills immediately.
  - ✗ Don't clean up with a dry brush or compressed air, use a vacuum system or wet cleaning.

- Personal protective equipment (PPE)**
- ✓ Chemicals in hazard group 5 can damage the skin and eyes, or enter the body through the skin and cause harm. See CGS S100 and S101 for more specific advice. Check the safety data sheets to see what PPE equipment is necessary.
  - ✓ Ask your safety clothing supplier to help you select suitable protective equipment.
  - ✓ Respiratory protective equipment (RPE) shouldn't be needed for routine tasks. It may be necessary for some cleaning and maintenance activities, eg cleaning up spills. Be aware that some maintenance activity may involve entry into confined spaces. Decide if supplied air is needed when RPE is used.
  - ✓ Ensure PPE is kept in a clean condition and replaced when necessary.

- Training**
- ✓ Give your workers information on the harmful nature of the chemicals.
  - ✓ Provide them with training on: operating the process; following maintenance procedures; when and how to use PPE; and how to detect and deal with leaks.

- Supervision**
- ✓ Have a system to check that control measures are in place and being followed.

- Further information**
- Safety data sheets.
  - *Maintenance, examination and testing of local exhaust ventilation* HSG54 HSE Books 1998 ISBN 0 7176 1485 9.
  - *An introduction to local exhaust ventilation* HSG37 HSE Books 1993 ISBN 0 7176 1001 2.
  - Control guidance sheets 101, 204, 302, S100 and S101.

Employee checklist for making the best use of the controls

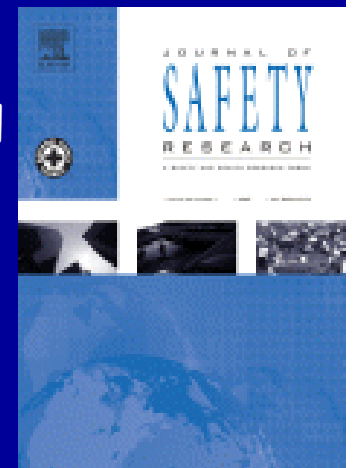
- Make sure any ventilation system is switched on and is working.
- Look for signs of leaks, wear or damage of any equipment used. If you find any problems, tell your supervisor. Do not carry on working if you think there is a problem.
- Avoid manual handling - use handling aids.
- Any damaged or leaking bags should be repacked away from the main storage area or disposed of safely. A responsible person should be involved to ensure this process is carried out safely.
- Wash your hands before and after eating, drinking or using the lavatory.
- Do not use solvents to clean your skin.
- Clear up spills straight away. For solids, use vacuum cleaning or wet mopping. Dispose of spills safely.
- Use, maintain and store any PPE provided in accordance with instructions.

# WHO and TF 14 Economic Evaluation of Interventions Task Force

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- **Cost effectiveness of interventions to reduce back pain and silicosis** WHO World Health Report - Oct 2002
  - Univ Mass at Lowell
- **Economic Costs of Interventions at Company Level Conference** November 2004 in Washington, DC
  - **Goal: to develop user-friendly tools for use at company level**
  - WHO, NIOSH, PAHO, ICOH, ILO, TNO, FIOH, U Mass Lowell
  - Proceedings in Journal of Safety Research, July 2005
  - Pilot efforts underway to use tools: Brazil, India, Vietnam



# WHO and ICN and TF 5 Health Care Workers

## Prevention of Needlesticks in Health Care Workers

- WHO and International Council of Nurses Pilot effort in
  - South Africa
  - Tanzania and
  - Vietnam
- Goal is to implement and evaluate training using the WHO Toolkit of materials to reduce HIV/AIDS in Health Care Workers



Funded by NIOSH, US

# WHO Global Occupational Health Products

- **Protecting Workers Health Series ... examples**

- **Psychological Harassment in the Workplace**

- CCs in Italy, Switzerland, Columbia (Spanish), Japan (Japanese)

- **Work Organisation and Stress**

- Univ of Nottingham CC
- CC in Japan (translation)

- **Performing Economic Assessments at the Company Level**

- TNO, The Netherlands CC
- IACP Italy (translation)

- **Prevention of Musculoskeletal Disorders**

- Germany CCs



# *WHO Global Network of Collaborating Centres in Occupational Health*

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And there are many other successes...



## *Preparing to Move to 2006 – 2010 Work Plan*

### Evaluation of the WHO Global Network CC 2001-2005 Work Plan

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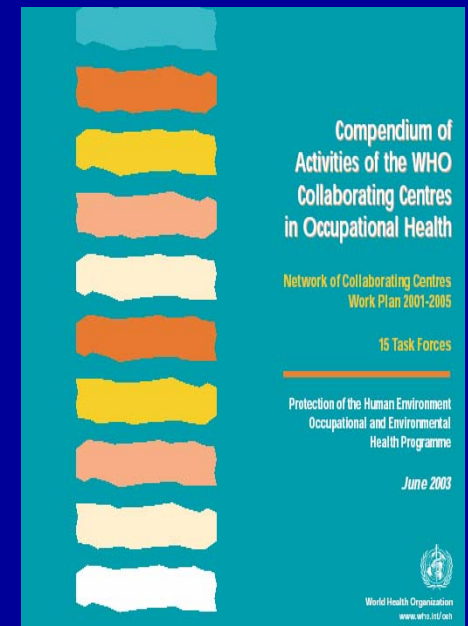
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#### • **Methodology of Work Plan Review**

#### • **Review of 350 projects in 15 Task Forces**

#### • **Criteria for success of Task Force:**

- **Benefit developing nations**
- **Broad CC involvement**
- **Substantial impact**
- **Global/regional emphasis**
- **Sustainable**

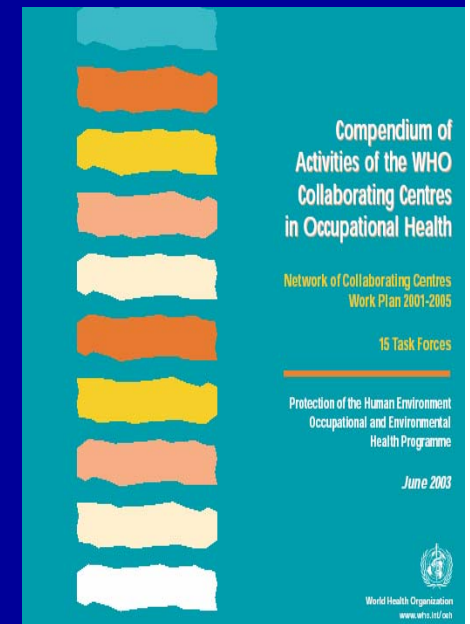


# Evaluation of the WHO Global Network CC 2001-2005 Work Plan Success of the 15 Task Forces

## Results of Work Plan Review

*(Task Force success in assisting developing nations)*

- 5 excellent (++++ or +++++)
- 8 adequate (++ or +++)
- 2 primarily national benefit (0 or +)



# Evaluation of the WHO Global Network CC 2001-2005 Work Plan

## Conclusions

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- 2001-2005 Work Plan was a successful first effort
  - Cohesiveness
  - Energy
  - Focus on priority areas to advance 'Occupational Health for All'
  - Contributions to developing nations
  - Promising global projects ready for action
  - Firm foundation for working together in future



# Evaluation of the WHO Global Network CC 2001-2005 Work Plan

## Recommendations for the 2006 – 2010 Work Plan

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- **Priorities**
  - Continue alignment with WHO and ILO priorities
  - Continue to address needs of workers and member-states
  - BUT... have fewer priority topics
- **CC Projects**
  - Fewer projects; truly collaborative with other CCs
  - Reflect regional and global impact
- **Processes**
  - Active leadership via commitment of time by CC
  - Periodic evaluation



# The WHO Global Network 2006-2010 Work Plan

Seventh Meeting of the Network of the WHO  
Collaborating Centers for Occupational Health

Stresa, Italy  
June 8-9, 2006



## Structure of 2006-2010 Work Plan

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- AA 1: Strategic global analysis
- AA 2: Evidence for action, and national policies and action plans
- AA 3: Practical approaches to identify and reduce occupational risks
- AA 4: Education, training, and technical materials
- AA 5: Development and expansion of occupational health services
- AA 6: Communication and networking



## Criteria for inclusion of projects in the 2006-2010 Work Plan

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- Fit into one of the six Activity Areas
- Collaborative with CCs in other countries
- Address an occupational health issue of **regional or global importance**
- Clearly show benefits and beneficiaries



## Number of Projects of the 2006-2010 Work Plan

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• AA1	4	Global situation analysis
• AA2	29	Evidence for action
• AA3	44	Practical approaches to reduce risks
• AA4	56	Education, training and technical materials
• AA5	11	Occupational health services
• AA6	19	Communication and networking

**Total**            **163**



## Management of the 2006-2010 Work Plan

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- Activity Area Managers
  - 25% time commitment from Collaborating Center
    - AA1 Kaj Elgstrand, NIWL Sweden
    - AA2 Joanne Elms, HSL, UK
    - AA3 Stavroula Leka, Univ Nottingham, UK
    - AA4 Leslie Nickels, Univ Illinois Chicago, USA
    - AA5 Timo Leino, FIOH, Finland
    - AA6 Claudina Nogueira, NIOH, South Africa
- Each Manager will now describe the Activity Area projects



Thank you for your attention!

